

THE EXPERIENCE OF FOOD [IN]SECURITY OF COLLECTIVE KITCHEN  
PARTICIPANTS IN A CHANGING FOOD ENVIRONMENT IN SASKATOON, SK

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By

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## **ABSTRACT**

Serious health inequities have been identified in the core neighbourhoods of Saskatoon, SK – a mid-sized Canadian city. Until late 2012, a large area of these neighbourhoods was considered a food desert (a geographic area where access to affordable, quality and nutritious food is limited), likely contributing to these health disparities. Food environments, broadly described as any opportunity to obtain food (influenced by physical, socio-cultural, economic and policy factors), are an important area of study to understand and affect change in community health. Academic literature to date does not contain any examples of how the opening of a new community-based grocery store in a food desert affects the experience of food security of those in a changing food environment. This research asks the question: How does Station 20 West influence the experience of food security of drop-in collective kitchen participants that meet there? Station 20 West (S20W) is a community enterprise centre that opened in Fall 2012 in the heart of Saskatoon’s core neighbourhoods. S20W includes a full-service not-for-profit grocery store (the Good Food Junction Cooperative Grocery Store, or GFJ), community kitchen space, a café, community meeting space, and the offices of community organizations, Saskatoon Health Region programs, and the University of Saskatchewan. This project builds on previous food environments research by investigating the experience of food security for participants in a new drop-in collective kitchen (CK) at S20W. Using semi-participant observation and responsive interviews, data was collected using a phenomenological approach about participants’ food procurement practices, their involvement in CKs, and their interaction with S20W co-locating organizations and other health-supporting organizations. The findings of this research illuminate the complexity of food [in]security. Participants’ experiences of food [in]security were often linked to their health and that of their families. Food [in]security is a dynamic continuum, and past experiences of food insecurity are formative in foodways that are later employed. Most participants interviewed were not core neighbourhood residents, so their food environments were not affected significantly by the opening of the GFJ. However, the drop-in CK at S20W is a potential gateway to other organizations and services available at S20W. Cross-promotion of co-locator programs and services, as well as promotion of the GFJ could increase awareness of the opportunities available, as well as synergy between co-locating organizations. Further research should explore the changes over time in the foodways of those who interact with S20W, to understand the longer-term effects of a food store opening in a former food desert.

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## **DEDICATION**

A masters' thesis is a learning journey, not a destination. I am so grateful for those who have journeyed with me over the last couple of years.

To my parents, Marj and Keith – thank you for teaching me early on that growing food and feeding your family well are very honourable things; the soil of our farm is as much a part of me as the lessons that I have learned there. You have rooted me and encouraged me along every bend in the road.

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To my communities afar - World Hunger Relief Farm, ECHO, House of Wisdom and East Vancouver – though distance and time separate us now, you have also been so formative to my exploration of food security and food sovereignty. It was in your kitchens (and in your gardens & barns, and around your cooking fires, bowls of rice and tables) that I began to ask some of the questions I have spent this season learning more about.

To the Core Neighbourhood Youth Co-op and the Food Bank & Learning Centre's Garden Patch – you have given me a place and a purpose in this community and taught me many things along the way – thank you for the meaningful work of which I have been a part. I have learned a great deal from those I have worked alongside, and much of what I have participated in has given me confidence and sensitivity in the research and writing of this work.

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# 1 INTRODUCTION

In North America, some of the major health problems are non-communicable diseases – specifically Type II diabetes and obesity-related conditions. It is commonly known that these diseases are influenced by diet and exercise. Research shows that collectively, North Americans eat more and move less than our grandparents’ generation did (Raine, 2004). It is recognized that the ways in which we construct and inhabit our social and built environments have changed. These changes to our environments – particularly to our food environments (FEs) (see section 1.5) – have a profound influence on our mental and physical health. Consequently, there is a need to shift population health research from documenting health disparities to studying and evaluating programs and structures that have the potential to affect positive change in the nutritional health of populations (Lotoski, Engler-Stringer & Muhajarine, 2015).

The study of food [in]security has come a long way from being focused on hunger and a lack of food, to an understanding of the complexity of various causalities of food insecurity, and the development of both objective and subjective ways to measure it. The core concepts of availability, accessibility, and utilization of food that construct the theoretical framework of household food security (Coates, Frongillo, Rogers, Webb, Wilde, and Houser, 2006) make it clear that the food environment is very influential in alleviating or contributing to food insecurity. This thesis work will study the experiences of food [in]security of women participating in a drop-in collective kitchen at Station 20 West, which is located in the heart of a former food desert in Saskatoon, Saskatchewan, Canada.

## 1.1 *Saskatoon’s food environments*

The city of Saskatoon is not exempt from food environment-related disparities. The term *food desert* (see section 1.5), a reality that was identified by core neighbourhood residents and community organizations in Saskatoon, was first used locally in CUISR’s (The Community-University Institute for Social Research) 2003 research project, *Access To Food In Saskatoon’s Core Neighbourhood* (Woods, 2003). The geographical area identified as a food desert was Saskatoon’s core and adjacent neighbourhoods: Holiday Park, King George, most of Riversdale, portions of Caswell Hill, Pleasant Hill, Westmount, and Mount Royal (Kershaw, Creighton, Markham, & Marko, 2010) (Figure 1). This report was the first of several research projects

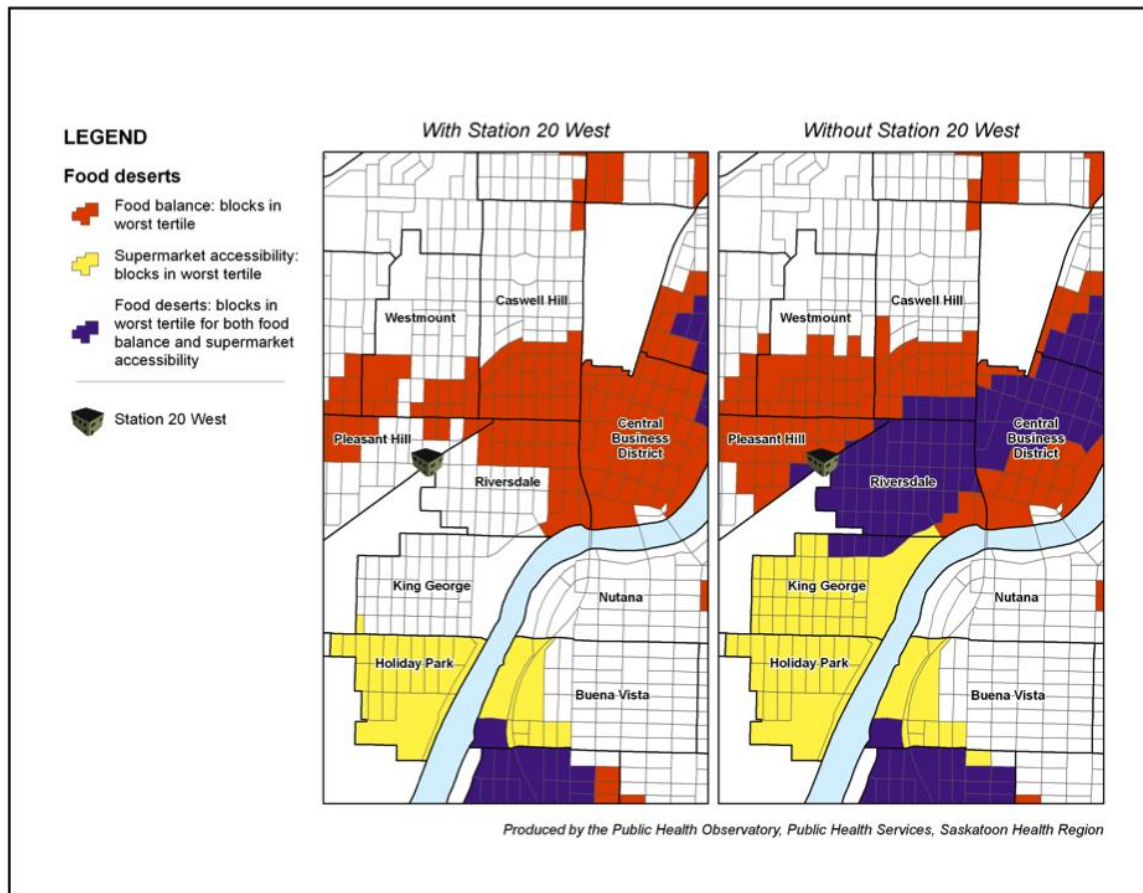
investigating access to food in Saskatoon. In subsequent years, several studies have identified the lack of access to healthy food as a major problem facing core neighbourhood residents (Hanson, 2011; Kershaw et al., 2010; Saskatoon Community Clinic, 2008).

Miazdyck –Shield (2012) summarizes the situation thus:

The issues of food insecurity and food access in Saskatoon's core neighbourhoods are a growing concern to residents, health professionals, academics and community activists. Attention to these issues has resulted in research projects that assess the problem and identify possible solutions. Voices from various sectors and disciplines are saying the same thing—both front-line experience and research demonstrate that food insecurity is significant in the Saskatoon core, it impacts health and it is in part caused by poor accessibility. People who do not live close to a full service grocery store have poorer health outcomes, consume less produce, have higher rates of preventable disease and eat more fast food.

## **1.2 The Good Food Junction and Station 20 West**

The reality of food insecurity and the desire to see improved food security and community well-being led to the establishment of Station 20 West (S20W) and The Good Food Junction Cooperative grocery store (GFJ). S20W is a *community enterprise centre* located on 20<sup>th</sup> Street and Avenue L in Saskatoon, SK that opened its doors in October 2012. It houses several organizations (co-locators), including CHEP Good Food, Inc., Quint Development Corporation, Saskatoon Health Region programming offices (Mothers' Centre, KidsFirst, Building Health Equity), and the University of Saskatchewan Office of Outreach and Engagement (focused on supporting community-engaged teaching and learning and community-based research), the GFJ Cooperative grocery store, and a café. The combination of services in close physical proximity, and particularly the opening of a grocery store, offer a perfect opportunity to study how changes in the FE affect the food security and well-being of core neighbourhood residents. Figure 1 shows Saskatoon's food deserts before and after the GFJ opened. The area identified as a food desert, in purple, includes city blocks that were calculated to be in the worst tertile for both food balance (the number of fast food outlets compared to the number of supermarkets) and supermarket accessibility (determined by measures of food proximity, diversity, variety) (Public Health Observatory, 2012).



**Figure 1.1 Saskatoon's food deserts, before (Right) and after (Left) the opening of Station 20 West (Public Health Observatory, 2012).**

### ***1.3 Research question and objectives***

The question guiding this research is: “How does Station 20 West influence the experience of food security of CHEP’s drop-in collective kitchen participants?”

The objectives of this research are as follows:

- i. To describe and analyze drop-in collective kitchen participants’ experience of food [in]security.
- ii. To discover and report the experiences of food procurement of drop-in collective kitchen participants.
- iii. To examine if and how the co-location of organizations and programming within Station 20 West influences the experiences of collective kitchen participants.

## **1.4 Significance**

The proposed research addresses needs in both academic and local population health circles. On an academic level, a literature review on food deserts and their effects on community health highlights "...the need for combined environmental and behavioral approaches in small [grocery]-store interventions." (Gittelsohn, Rowan, & Gadhoke, 2012). This research will address the needs identified by Gittelsohn et al. by collecting information from participants about changes in the food environment and how these changes influence behaviors related to food. The Institute of Medicine Workshop on the Public Health Effects of Food Deserts concluded that, "Most panelists agreed that more qualitative research is needed, in which people living in food deserts describe their access and how it might impact their food choices" (Institute of Medicine (IOM) and National Research Council (NRC), 2009, p. 23).

On a local level, studying the possible changes in food security status of core neighbourhood residents after the opening of the GFJ has been called for by CHEP Good Food Inc. The Good Food Junction Baseline Data Report was compiled specifically so that further research would have a starting point from which to compare future data collection (Miazdyck-Shield 2012). While this project was occurring, research on the GFJ's purchasing data, as well as surveys in the neighbourhood were being conducted to learn about changes in the food environment in the core neighbourhoods. This project adds depth through qualitative data to the quantitative data being collected through that project.

## **1.5 Important terms**

**co-locator** – an organization or business that is a tenant of Station 20 West

**collective kitchen** - a small group of people who get together to cook in bulk for their families. These cooking groups pool their money, skill and energy to cook healthy and economical meals that they will take home and share with their families (Collective Kitchen Partnership 2004)

**community enterprise centre** - a not-for-profit business with financial, social and environmental benefits that involves a complementary mix of community organizations, public institutions, businesses and co-ops (<http://station20west.org/features.html>)

**food environment** - any opportunity to obtain food. This includes physical, socio-cultural, economic and policy factors at both micro- and macro-levels. Food environments include the accessibility and availability to food as well as marketing and advertising of food and food products (Glanz et al., 2005)

**food desert** - a geographic area, particularly lower-income neighbourhoods and communities, where access to affordable, quality, and nutritious foods is limited (IOM & NRC, 2009)

**food security** - exists when all people, at all times, have physical and economic access to sufficient, safe and nutritious food to meet their dietary needs and food preferences for an active and healthy life (FAO, 1996).

**food sovereignty** - the right of nations and peoples to control their own food systems, including their own markets, production modes, food cultures and environments (La Via Campesina, 1996)

**foodways** - the cultural and social practices that affect food consumption, including how and what communities eat, where and how they shop and what motivates their food preferences. (Alkon et al. 2013, p. 127)

## 2 LITERATURE REVIEW

### 2.1 Food security

**Food security**, here defined by the signatories of the 1996 World Food Summit, “...exists when all people, at all times, have physical and economic access to sufficient, safe and nutritious food to meet their dietary needs and food preferences for an active and healthy life” (FAO, 1996). Food *insecurity*, the absence of food security, therefore, is far more complex than hunger – a biological phenomenon. It includes socioeconomic dimensions (Campbell, 1991). Campbell states that:

The measurement of food insecurity at the household or individual level involves the measurement of those **quantitative, qualitative, psychological and social or normative constructs** that are central to the experience of food insecurity, qualified by their **involuntariness and periodicity** (p. 409, 1991).

Furthermore, Coates, Frongillo, Rogers, Webb, Wilde, and Houser, through meta-analysis, have confirmed that “...**insufficient food quantity, inadequate food quality, and uncertainty and worry about food** were a significant part of the food insecurity experience in all [15] sampled cultures...”, and concerns about **social unacceptability** related to food acquisition were also observed (2006, p. 1438S). Coates et al. term these the four ‘**core household food insecurity experiential domains**’.

Campbell (1991) also differentiates that unlike hunger, which is typically associated with individuals, food [in]security can apply to the state of nations, communities, households or individuals. Different frameworks can be used at these different scales to study and measure food security. According to Webb et al. (2006), the FAO’s definition of food security equally acknowledges the key concepts of food *availability*, food *access*, and food *utilization* (1996). They also suggest that these are ordered hierarchically; access to food cannot occur without sufficient availability, though food availability does not guarantee food access; and likewise for the utilization of food (Webb et al., 2006). In addition, risk is proposed as a fourth concept, as it can drastically affect any or all of the other key concepts (Webb et al., 2006). Examples of risk

might include becoming ill, losing one's job, or significant weather events such as drought or flooding. For the purposes of this research, food security is discussed in relation to households.

## **2.2 *Collective kitchens***

Collective kitchens address, at least in part, aspects of household food security. Collective kitchens (CKs or 'kitchens') are food and cooking-related programs that began in Canada in an informal way when three low-income Montreal women came together to cook in bulk to save money (Fournier, Provost, & Goudreault, 1998). These programs now exist in all provinces and territories (Engler-Stringer & Berenbaum, 2005). In Saskatoon, The Collective Kitchen Partnership (CKP) is one of the programs supported in part by CHEP Good Food Inc. (CHEP), along with the Saskatoon Community Clinic and the Saskatoon Health Region. The CKP describes a collective kitchen (CK) as "a small group of people who get together to cook in bulk for their families. These cooking groups pool their money, skill and energy to cook healthy and economical meals that they will take home and share with their families" (Collective Kitchen Partnership, 2004).

CKs vary in format and specific objectives from program to program. A study of CKs within the Calgary Health Region Collective Kitchen Program classified the way CKs were organized (Hamilton & Bhatti, 1996). They were categorized as community-based (led by community volunteers), or agency-based, often with a particular focus, such as on health, multiculturalism, or an age-group. The phrase 'community kitchen' is used interchangeably for different programs in some locations. For example, Tarasuk and Reynolds (1999) studied 'community kitchens', which included collective kitchens, cooking classes, and community meal programs. To be consistent, this document will use 'collective kitchen', referring to the CKP definition above. Normally, CKs in Saskatoon meet in a space such as a school or church kitchen (not in a home), and decisions are made as a group, the planning of meals and shopping for groceries is divided amongst members, and resources (money, labour, and sometimes cooking equipment) is pooled together. The size of the group can vary but is an average of four or five participants (Engler-Stringer, 2005). Though the CKP designates that the meals prepared at the kitchen are to be taken home for the participants' households, other models of CKs involve sharing a meal (all or some of the food that is prepared) together as a group.



In their literature review of CKs in Canada, Engler-Stringer and Barenbaum (2005) found that:

“The published research on collective kitchens has focused on aspects of food security (Tarasuk and Reynolds, 1999; Crawford and Kalina, 1997), nutrition education (e.g., food skill building) (Crawford and Kalina, 1997; Fano, Tyminski, & Flynn, 2004), health promotion (Fano et al., 2004), and mental health (Racine and St-Onge, 2000; Ripat, 1998, Tarasuk & Reynolds, 1999 (e.g., social support and empowerment), as well as on the social and economic processes that influence participants' lives (Fernandez, 1996).” (p.247)

There are conflicting findings on the degree of impact of a small-scale food program, such as a collective kitchen, on household level food security, particularly among very low-income groups (Tarasuk & Reynolds, 1999, Crawford & Kalina, 1997). When examined through the four core household food insecurity experiential domains of quantitative, qualitative, psychological and social constructs that can be used to measure food security, the literature shows that some constructs may be impacted more than others.

The ability of a CK to address the quantitative aspects of household food insecurity differs from kitchen to kitchen. Tarasuk & Reynolds (1999) reported that because the groups they studied met only once per month, making enough food for three to six meals, this did not make a significant impact on quantitative measures of food security. Likewise, participants in Crawford & Kalina's study (1997) indicated that participating in CKs had fewer economic benefits than they had hoped. However, most groups studied by Engler-Stringer cooked larger quantities of food (from three to 24 meals per person or family each month) (2005). Engler-Stringer summarized that CKs that prepared large quantities of food (more than five family-sized meals each month), and whose activities were subsidized in some way had the greatest impact on quantitative dimensions of food security.

In regards to the influence of the quality of food available through CKs, Engler-Stringer found that most participants thought that the quality of food prepared in a CK was high. Participants in her research expressed that there was a greater variety of food prepared at a CK compared to what they purchased to use at home. Single participants also reported that participating in the CK allowed them to consume more fresh vegetables and meat, because

cooking as a group meant they did not have to purchase items in larger quantities than they might be able to consume, so they didn't have to worry about spoilage and waste (2005).

The psychological and social aspects of food [in]security, two experiential domains, are not easily separated, and so they will be discussed in tandem. Most research confirms the valuable social support that these programs create (Engler-Stringer & Berenbaum, 2006, Tarasuk & Reynolds, 1999). For participants who are stay-at-home parents, the CK is a social time with adults that may not happen frequently because of childcare responsibilities and the limitations of a fixed income (Tarasuk & Reynolds, 1999). "The highly social atmosphere in CK lends itself to the sharing of ideas and information" (Tarasuk & Reynolds, 1999, p. 14). For some participants, involvement in a community-based food program is a logical augmentation to their current food management practices (Tarasuk & Reynolds, 1999). Other participants may learn many new tactics to managing their food budgets and food preparation practices through informal means.

An important social dimension of food security is the acceptability of where or how food is obtained. For example, charitable food assistance, such as visiting a food bank, is not considered a socially acceptable way to access food (Campbell, 1991, Engler-Stringer, 2005). Participation in CKs does not carry the same stigma associated with accessing food from the food bank, even if the full cost of participating in the CK is subsidized (Engler-Stringer, 2005). Engler-Stringer (2005) agreed with others that the participatory aspects of CKs make them distinct from charities.

Finally, another significant psychosocial aspect of CK participation is that it can be a venue to access other support services and groups available (Tarasuk & Reynolds, 1999). Tarasuk and Reynolds explain that:

While all the kitchens provided social recreation, a few were constructed to offer much needed social and personal support to women whose lives were characterized by particularly difficult and isolating situations...these kitchens had the benefit of a facilitator or coordinator with strong counselling and referral skills. This person understood that providing personal support to participants in crisis and to those with special needs was a central part of her job (1999, p. 14)."

However, increased personal support may not only be facilitated through leaders; these networks may also develop through participant relationships.

### 2.3 Food environments

Food environments (FEs) are an important topic to review concepts related to food security because they influence both food access and food availability. FEs are simply any opportunity to obtain food, which can encompass physical, socio-cultural, economic and policy factors on both small and large scales (Townshend & Lake, 2009). Population health research has identified FEs – the places in which people live, work, play and eat – as having a significant effect on dietary intake and health (Li, Harmer, Cardinal, Bosworth, Johnson-Shelton, 2009; Sallis & Glanz, 2006; Townshend & Lake, 2009; Salois, 2007, Pasala, Rao, & Sridhar, 2010). Glanz et al. (2005) further divide environmental variables of nutrition into community, organizational and consumer nutrition environments, as part of their model of community nutrition environments. Government and industry policies, and media and advertising components of the information environment influence these environmental variables (see Figure 2 below). Clearly, complex factors and interactions are at play in affecting individual and household food choices and eating patterns.

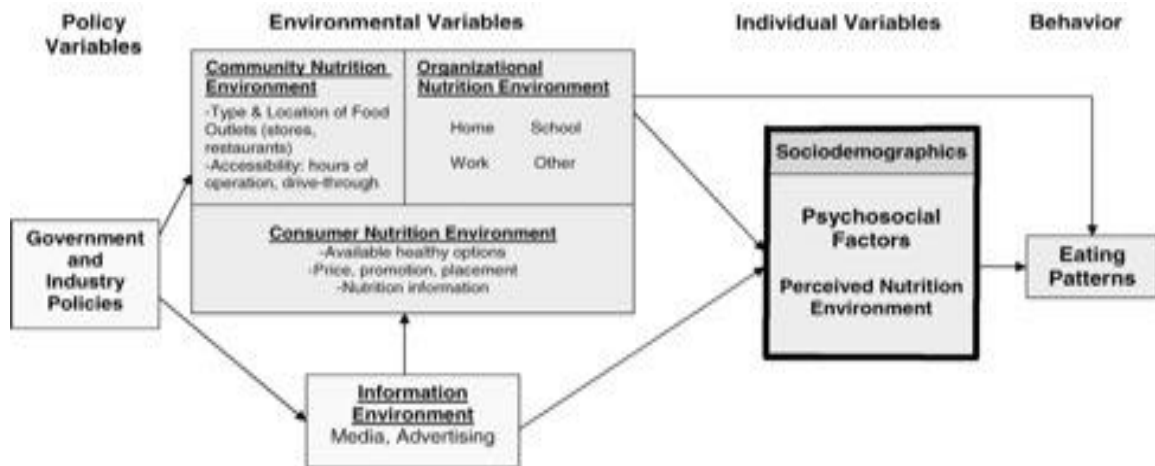


Figure 2.1 Model of Community Nutrition Environments (Glanz et al., 2005)

A *food desert*, a specific type of food environment, is described as "...a geographic area, particularly lower-income neighbourhoods and communities, where access to affordable, quality, and nutritious foods is limited" (IOM & NRC, 2009, p. 8). 'Limited access' may refer to distance, to cost, and/or to time-cost (IOM & NRC, 2009). Mapping has shown that food deserts are also frequently areas with higher rates of obesity and non-communicable chronic disease,

such as diabetes (IOM & NRC, 2009). Conversely, neighbourhoods with access to supermarkets and grocery stores may be linked to improvement in vegetable consumption, general improvement in healthier food intake and lower body weight of neighbourhood residents (Larson, Story, & Nelson, 2009). Awareness of the importance of the FE in influencing food security and health outcomes has led to projects involving developing grocery stores and piloting various food-related interventions in food deserts (Miazdyck-Shield, 2012).

## **2.4 Food procurement and foodways**

The ways in which people navigate their food environments are *foodways* – “...the cultural and social practices that affect food consumption, including how and what communities eat, where and how they shop and what motivates their food preferences.” (Alkon, Block, Moore, Gillis, DiNuccio, & Chavez, 2013, p. 127). There is a small body of literature that examines foodways of urban, low-income Canadians, highlighting aspects of food purchasing, food insecurity, and poor health. It is generally supported by similar research conducted in the U.S. (Vozoris & Tarasuk, 2003). Connections have been made between food insecurity increasing as income decreased, and also between food insufficiency and households reporting poorer functional health, multiple chronic conditions, suffering from major depression or distress, and having poor social support (Vozoris and Tarasuk 2003). Additionally, those experiencing food insecurity also report personal distress, frustration, despair, and feeling isolated and lonely as a result of their food insecurity (Runnels, Kristjansson, & Calhoun, 2011). For people who report having a low-income, price has been found to be the most important factor in making food-purchasing decisions (Dachner, Ricciuto, Kirkpatrick, & Tarasuk, 2010).

As Cannuscio, Weiss, & Asch (2010) conclude from their study of urban foodways and health disparities:

...Food environments shape people and their food-related behaviors, which in turn reshape or reinforce the food environment. Foodways, including the many associated pitfalls from production to purchase to consumption of food, present a complex challenge to the well-being of low-income residents across the life course. (p. 389)

Foodways need to be studied in tandem with food environments to understand the compound and often difficult circumstances surrounding how people, particularly of low-income, come by the food that they and their families eat.

## **2.5 Summary**

Food [in]security is a complex experience that has common domains that span cultures, including worry and uncertainty about food, compromises on the quality of food, and then sacrificing the quantity of food.

Collective kitchens have been established in communities across Canada to address access to affordable, nutritious meals. CKs take many forms but they share the characteristic of bringing together a small group of people to cook meals in bulk (Engler-Stringer, 2005). A literature review of CK research reveals that CKs address, to a greater or lesser extent, aspects of food security, nutrition education, health promotion, mental health, support and empowerment.

A precedent in research exists for gathering information about food security from collective kitchen participants. Engler-Stringer et al. have published several works based on research using semi-participant observation and in-depth interviews with CK members and leaders, to learn about their food-related practices (Engler-Stringer, Stringer, & Haines 2011, Engler-Stringer & Berenbaum, 2007a & b, Engler-Stringer & Berenbaum, 2006). Gough has also used qualitative research methods to learn about the experiences of food insecurity of those who use community food security organizations, which included CKs (Gough, 2014).

CKs are just one program at S20W that addresses aspects of food security. CHEP Good Food Inc., which is now housed at S20W, supports various programs aimed to address different facets of food security. In addition, the opening of a grocery store in a former food desert is a significant change to Saskatoon's food environment. The food environment, or the opportunity (or lack thereof) to obtain food in the places where people live, work, and play, can have a significant effect on the food security of an individual or household, particularly if they do not have access to a vehicle (Miazdyck-Shield, 2012). It is known that food desert neighbourhoods are associated with higher rates of obesity and diabetes (IOM & NRC, 2009), and neighbourhoods with access to supermarkets and grocery stores may have more neighbourhood residents with healthier food intakes and lower body weights (Larson et al., 2009). However, only a handful of studies have been published that report the effects of opening a grocery store in a food desert, and none of these studies include a successful example of a community-based, cooperative grocery store (Miazdyck-Shield, 2012), nor the context of a community enterprise

centre. The identified gap in the literature includes a call for a more in-depth examination of the physical and social determinants associated with access to food in food deserts (Munoz-Plaza, Filomena, & Morland, 2008).

This project will use the Community Nutrition Environments model, developed by Glanz et al. (2005), to examine the experience of food security of Collective Kitchen participants, as described by the core household food insecurity experiential domains - quantitative, qualitative, social and psychological. Phenomenology will guide the gathering and analyzing these experiences. This methodology is introduced in the following section.

### **3 METHODS**

#### ***3.1 Methodological framework***

##### **3.1.1 Researcher's background**

As discussed below in Section 3.1.2 'Phenomenology', it is the responsibility of the researcher using this method to "...make explicit our understandings, beliefs, biases, assumptions, presuppositions, and theories" (van Manen, 1990, p. 47). Creswell (2009) also advises those commencing in research to "...make explicit the larger philosophical ideas they espouse", (p. 5) to explain why they choose to approach their research the way they do. I have entered into this research with a social constructivist worldview, meaning that I understand individuals to seek meaning and engagement with their world based on their historical and social perspectives (Creswell, 2009). I also acknowledge that my interpretation of the data in this project is viewed through the lens of my own historical and cultural context. This section attempts to briefly describe the context of the researcher so as to situate myself and the reader in reflecting on the experiences of others.

I have socialist and feminist views, though I do not define myself by either of these labels. I hold these ideologies because they are informed by my understanding of the Biblical narrative of seeking justice, peace, and solidarity with the marginalized. My work and volunteer positions as a leader in food-based community programs drew me to this research area. I have witnessed the value of food security-related programming for participants, and I have long been interested in the opportunity to hear more in-depth stories of how food-based community programs may make a difference in situations of food insecurity, and how they can be better adapted to contribute to food security, and if possible, to food sovereignty.

Food security is something I took for granted for most of my life, and the concept of food sovereignty only became apparent to me towards the end of my undergraduate degree as an underlying issue of many food security-related problems throughout the world. I grew up on a conventional grain and oilseed farm in East-Central Saskatchewan and never questioned whether or not our family would have enough to eat. I gardened alongside my mother, who has a BSc in Home Economics, and knew growing up that in Canada we pay far less for food than many do. Healthy food, prepared in our kitchen, was central to family life.

During my undergraduate degree, I volunteered with some food-related programs, such as the Breakfast Club at Nutana Collegiate run by the Saskatoon Salvation Army. Though I felt it was an important program, I was frustrated with the lack of attention to good nutrition and hierarchy of power that I felt – volunteers literally handed down a greasy, unbalanced meal to students. Since then I have participated, as a staff person or volunteer, in several other food and garden-related programs. This work has led to a growing awareness of the social, economic, and political determinants of food security, and ultimately, food sovereignty.

I have not experienced poverty directly, mainly because I have family and social support networks that would prevent me from doing so. However, during times in my adult life, some during this project, I have had a very tight budget, and experienced the stress and anxiety that comes with not knowing if there will be enough money in my bank account to pay all the bills at the end of the month. Though these were quite difficult seasons, I appreciate the context they allowed me for this research in having shared experiences with the participants with whom I spoke.

### **3.1.2 Phenomenology**

Although discerning what research methodology will best answer the proposed questions is important, understanding one's motivations for asking such questions as a student-researcher is equally valuable. Recognizing what seems to be a good fit for how one might feel comfortable and equipped to find answers is essential. Phenomenology is a good fit, because it acknowledges that everyone is an expert in their own story, and that their story - their lived experience - is of value. Morse and Richards agree: "...human existence is meaningful and of interest in the sense that we are always conscious of something....Human behaviour occurs in the context of ... relationships to things, people, events and situations" (2002, p. 45).

Phenomenology is an appropriate methodology to understand how participants' experience of food security (or lack thereof), is influenced by the drop-in Collective Kitchen at Station 20 West. "The phenomenologist's concern is to uncover the meaningful history of the individual's world" (Rothe, 2000, p. 40). This research methodology is used to discover the reasons why people do what they do; phenomenology is the seeking to understand how people make decisions



and choices, the basis of particular actions and what those actions mean for their lives. (Rothe, 2000).

This methodology gives power and authority to the voice of the participant – they are the expert in their own lived experience – but instead of becoming part of a statistical equation, their words (and to some extent, their actions and presence) become data. Phenomenology also allows the research process to be more human. It is not a process of data collection – it is co-creation of data that occurs between the participant and researcher (van Manen, 1990).

Phenomenology has strong philosophical roots in its origin, stemming largely from the writings of German mathematician Edmund Husserl (1859-1938). To Husserl, phenomenology became “...a descriptive method as well as a human science movement based on modes of reflection at the heart of philosophic and human science thought.” (van Manen, 1990, p.184). In his later works, he develops the idea of the lifeworld (*Lebenswelt*): “the world of immediate experience”.

This methodology is commonly used in the social and health sciences (Creswell, 2007), as well as education and pedagogy (van Manen, 1990). What phenomenology consists of, in philosophy and in practice, has been debated widely. Dermot Moran, who authored a text on phenomenology, does not pretend that there is a history of agreement or unity in all that phenomenology is: “...the philosophers who in some sense identified with the practice of phenomenology are extraordinarily diverse in their interests, in their interpretation of the central issues of phenomenology, in their application of what they understood to be the phenomenological method...” (2000, p. 3)

What is agreed upon? According to Finlay: “Any research which does not have at its core the description of “the things in their appearing,” focusing on experience as lived, cannot be considered phenomenological.” (2009, p. 9) Where, then, do differences come in? Finlay (2009, p. 6-7) cites the following as areas where varied opinions exist: The firmness of the definition of phenomenology, approaches taken to the researcher’s subjectivity, if descriptions should be normative (general), or can also be idiographic, whether interpretation is included as part of the phenomenological process, if phenomenology should be considered a science or an art, and where phenomenology fits on the modern-postmodern-beyond continuum. Rather than

explaining the spectrum of opinions on each of these points, I will describe the method I have chosen, and where it falls within the spectrum.

I chose to follow the work of van Manen, because his starting point seemed to align with the approach that brought me to this project: we come to a place of wanting to know about a subject because we care about it. He says: “From a phenomenological point of view...to do research is a caring act: we want to know that which is most essential to being” (1990, p. 5). In addition to van Manen’s hermeneutic phenomenological approach, I have gleaned the perspectives of Linda Finlay, who reviews phenomenological methods in her 2009 article, *Debating Phenomenological Research Methods*, and then offers her position on several points of divergence. Her balanced approach of practicality and her attempt to capture the spirit of what phenomenology aims to achieve in the health sciences resonated with me.

One point of debate for phenomenologists is whether to use data to describe the experience of one individual (the particular, or idiographic), or the experience of many. van Manen, whose methods stem from Husserl, and then Giorgi, shifts his focus slightly from a focus on the lifeworld, or *Lebenswelt*, to a reflective and practical focus on the *lived experience* of participants (Finlay 2009, p. 9). Finlay also describes the perspective of Halling (2008), who takes the ‘middle position’: that phenomenology can describe both the particular and individual as well as the general structure of the experience (Halling 2008, p. 145). This is as long as, Halling says, “...one does not treat the general description as more real than the experience itself or as a final truth about its essence. There is always more to be said, different perspectives from which to say it, and a variety of ways of saying it” (Halling 2008, p. 145).

When it comes to the discussion of interpretation vs description, van Manen, under the hermeneutic school of thought argues “...for our embeddedness in the world of language and social relationships...” and therefore, “Interpretation is not an additional procedure: It constitutes an inevitable and basic structure of our “being-in-the-world”. We experience a thing as something that has already been interpreted” (Finlay 2009, p. 11).

When addressing the subjectivity within research, all phenomenologists agree that subjectivity exists because of the inherent relationship between the researcher and participant. As Finlay describes it, “...it is precisely the realization of the intersubjective interconnectedness

between researcher and researched that characterizes phenomenology. The question at stake is to what extent, and how, researcher subjectivity should be marshalled in phenomenological research” (Finlay 2009, pg 12). van Manen takes the position that the researcher needs to “...make explicit our understandings, beliefs, biases, assumptions, presuppositions, and theories” (1990, pg 47). Then, we do not completely forget or ignore these, but are aware of them so we might guard against their influence on our reflections of others’ experiences (van Manen, 1990, pg 47).

Also inherent to phenomenology is the need for the researcher to approach the situation with a ‘phenomenological attitude’, where “...the researcher strives to be open to the “other” and to attempt to see the world freshly, in a different way....retaining an empathetic wonderment in the face of the world” (Finlay, 2009, pg 12).

van Manen weighs in heavily on the artistic potential of phenomenology:

Textual emotion, textual understanding can bring an otherwise sober-minded person (the reader but also the author) to tears and to a more deeply understood worldly engagement ... To write phenomenologically is the untiring effort to author a sensitive grasp of being itself. (van Manen, 1990, p. 129, 132)

To which Finlay adds, “Similarly, I value the communicative power of research that challenges, unsettles, and reverberates with our everyday experience of life” (Finlay, 2009, p.15).

### **3.1.2.1 *van Manen’s Methodical Structure of Human Science Research*** **(van Manen 1990, p. 31-34)**

In his text, *Researching Lived Experience: Human Science for an Action Sensitive Pedagogy*, Max van Manen describes the ‘doing’ of phenomenology as a “dynamic interplay among six research activities”:

- 1) “turning to a phenomenon which seriously interests us and commits us to the world;”:  
van Manen does not attempt to separate the researcher from the researched. The researcher enters into a research question not as a project, but as a journey: “It is always a project of someone: a real person, who, in the context of particular individual, social, and

historical life circumstances, sets out to make sense of a certain aspect of human existence” (van Manen, 1990, p. 31).

- 2) “investigating experience as we live it rather than as we conceptualize it;”

This means letting go of the researcher’s preconceived notions of the experience, and also recognizing that any relationship the researcher has with the experience is but one aspect of the experience. (van Manen, 1990, p. 32)

- 3) “reflecting on the essential themes which characterize the phenomenon;”

Themes are a means by which we organize phenomenological research and writing.

Themes are tools that describe the structures of the experience, though that description cannot be treated as rigid and formulaic. van Manen describes themes using the following four points:

(1) Theme is the experience of focus, of meaning, of point.

(2) Theme formulation is at best a simplification. We come up with a theme formulation but immediately feel that it somehow falls short, that it is an inadequate summary of the notion.

(3) Themes are not objects one encounters at certain points or moments in a text.

(4) Theme describes an aspect of the structure of lived experience.” (van Manen, pg 87)

- 4) “describing the phenomenon through the art of writing and rewriting;”

The turning of themes into words – the phenomenological description of an experience – is not an isolated step in the research method. It is a thoughtful and iterative process, as it is often by writing that thoughts are formed (van Manen 1990, pg 32 and 33).

- 5) “maintaining a strong and oriented pedagogical relation to the phenomenon;”

There are many pitfalls to which the phenomenological researcher can succumb, including getting caught up in abstract theorizing, returning to pre-conceived notions, getting side-tracked, becoming narcissistic, or self-indulgent, just to name a few (van Manen 1990, pg 33). It is important to return frequently to the original question, to

consistently refresh an attitude of new-ness to the phenomenon, and to be aware of these traps that can prevent the researcher from keeping the original focus.

6) “balancing the research context by considering parts and whole”

The researcher must continually be aware of the bigger picture of the phenomenon being studied, and not get so caught up in the details of a particular theme that he or she loses sight of how each theme is part of the whole larger picture of the phenomenon (van Manen 1990, pg 33-34).

van Manen also clarifies that although these ‘steps’ are presented in a sequential order, the process is actually circular and iterative, rather than linear, and also that several ‘steps’ may be occurring at the same time. He cautions that phenomenology is not formulaic, but rather, “...the critical moments of inquiry are ultimately elusive to systematic explication. Such moments may depend more on the interpretive sensitivity, inventive thoughtfulness, scholarly tact, and writing talent of the human science researcher.”

### **3.1.3 Responsive interviewing**

Rubin and Rubin (2012) explain responsive interviewing as a relational style of interviewing that emphasizes trust between the interviewer and interviewee. It allows for a more conversational style of discourse rather than a structured question and answer interaction. It is a qualitative method of data collection that lends itself well to phenomenological methodology, because of the adaptability implicit in the method. As described by Rubin and Rubin (2012):

The pattern of questioning is flexible; questions evolve in response to what the interviewees have just said, and new questions are designed to tap the experience and knowledge of each interviewee...Interviewer and interviewee together work out the answers to research questions. It is a joint activity based on respect. (p. 36)

Similar to active interviewing, which is described by Holstein and Gubrium, in *The Active Interview* (1995), this methodology is based on an interpretive constructionist paradigm: that knowledge comes through understanding “...how people interpret what they encounter, and how they assign meanings and values to events or objects” (Rubin and Rubin, 2012, p. 19). Therefore, interviews with each participant will seek to understand the same research question,

and will revolve around the same themes, but the internal validity of the research is not reduced by not having scripted questions that need to be asked verbatim, in the same order, with each participant.

### **3.2 *Research design and context***

This study used responsive interviewing accompanied by semi-participant observation. The researcher attended three sets of drop-in collective kitchen sessions that ran over the period of twelve months (Fall 2012, Spring 2013, and Fall 2013). Each session ran approximately five cooking dates (once per week). In the first set (Fall 2012), the CK was held in the morning, but because of low attendance, it was moved to the evening in 2013. The program was structured so that \$5 was charged for each participant per session. Childcare was available if needed, as was a taxi ride home, though participants usually arrived at S20W via their own means, and sometimes carpooled instead of taking taxis. Participants were usually asked what they were interested in cooking the following week, though no formal decision-making process (for example, consensus) was used. Supplies for each session, as well as containers for storing and transporting the food were purchased by the coordinator, so that all participants needed to do was be present and participate. Meals that were prepared (some examples are chicken stir fry, lasagna, and chili and blueberry muffins) were taken home rather than shared together at the CK.

The researcher assisted with collective kitchen activities as appropriate, and took notes after the session had finished when needed. After getting to know participants, and receiving consent, the researcher conducted responsive interviews with a total of eight participants. The interviews took place at a location of the participants' choice: coffee shops, restaurants, and often Station 20 West. Financial assistance with childcare and transportation were offered, but no participants indicated that they required either form of accommodation.

Inclusion criterion for interviewing required that the participant had attended at least two CK-related events at Station 20 West; this included both drop-in collective kitchens, and Grub'n'Gabs (events held three times a year that involved a family-friendly community meal and nutrition activities). This criterion was intended to increase the likelihood that the participant is familiar with Station 20 West and its co-locating organizations. This design used non-probability sampling: Polkinghorne (1989) suggests interviewing between 5 to 25 participants for phenomenological research, though Creswell (2007) does not specify a recommended number of

participants. Because the program was a drop-in and attendance was not consistent from week-to-week, it's not possible to know what the total number of participants that could potentially have been interviewed might be; the researcher's estimate is between about 25 and 30 in total. Most participants were female, though a few males were present on occasion; most often they were a son or husband of a more regular female participant. The majority female participants is reflected in the sample.

Participants were invited for interviews until saturation (the point at which the researcher is not gathering any new information from additional interviews or data collection) was reached. Interviews were recorded using a digital audio recorder (two recorders were used during each session in case one ran out of battery power). Interviews were transcribed verbatim by the researcher. Transcripts were coded to find themes common to the experiences of all participants. Appendix A is copy of the script that was used to guide the interview.

### ***3.3 Ethical approval***

The study has been approved by the University Advisory Committee on Ethics in Human Experimentation for the Behavioural Sciences at the University of Saskatchewan. Appendix B is a copy of the certificate of approval.

### ***3.4 Data analysis***

The researcher transcribed the interviews in order to become better acquainted with the data. NVivo 10 was used to organize and analyze the interviews. As described above in Section 3.1.2, van Manen's Methodical Structure of Human Science Research was used throughout the research, and step three, "reflecting on the essential themes which characterize the phenomenon" guided the distillation of themes.

### ***3.5 Member checking***

On November 13, 2014, all of the interviewed participants were invited to a dinner to thank them for their participation, and give them a chance to offer feedback on the researcher's findings. The dinner was held at the University of Saskatchewan Office of Outreach and Engagement at Station 20 West. Three of the eight participants who were interviewed attended; one cancelled at the last minute, and one met with the researcher individually at another time. The researcher presented the main themes listed in the Discussion chapter, as well as a summary

of why their participation was important (highlights from the Implications for Research, Policy and Practice chapter). The findings were discussed quite broadly to maintain the confidentiality that was assured at the time of the interview (for example, no direct quotes were used, even with pseudonyms). Participants were in general agreement with what was presented; none posed any disagreements with the findings.



## 4 RESULTS

Found in this chapter are the results of the responsive interviews of eight drop-in collective kitchen participants at Station 20 West, as well as my observations from participating in the CKs. The interviews took place at a time and location of the participants' choosing: a restaurant, coffee shops, and various places at S20W. Participants were offered assistance with childcare and transportation so as to reduce barriers to participate in the research, and were given a gift certificate to the Good Food Junction to thank them for their time.

These findings have been organized by the three research objectives guiding this research, and grouped into themes that comprise the experiences of the participants. Large excerpts from the interview transcripts have been used, as the experiences of the participants are often best expressed in their own words. Pseudonyms have been given to participants to protect their identity but maintain a personal connection with the speaker. The themes presented here have been developed according to van Manen's Methodical Structure of Human Science Research (van Manen 1990, p. 31-34), through reflection, writing, and rewriting.

### ***4.1 The experience of food insecurity***

Using the framework developed by Coates et al. (2006) that outlines the core household food insecurity experiential domains (introduced in Section 2.1), I guided the conversation with participants to touch on their experiences with insufficient food quantity, inadequate food quality, uncertainty and worry about food, and concerns about social unacceptability related to food acquisition. In addition to the core household food insecurity experiential domains, there were several other themes that developed as participants shared their experiences of food insecurity. The most prominent were food procurement strategies, health, food skills, relationship and leadership.

#### **4.1.1 Social acceptability, quality, and the food bank**

The topic of food quality was often tied to conversations about the food bank, which were also closely linked to the social acceptability of acquiring food there. For the sake of keeping the experience intact, I have kept these three topics grouped together.

Though some participants spoke appreciatively about the efforts of the Saskatoon Food Bank and Learning Centre (from here on called the food bank), any participant that mentioned accessing emergency food hampers at the food bank spoke of it as being a last-resort measure that was not ideal. Several participants used the phrase “have to”, meaning that it was not an option that they wished to exercise. They saw it as coping, or what they needed to do to get through their present life circumstance; something you did because you “had to”, not because you wanted to. A phrase that was used by several participants in describing the experience of food insecurity was “you do what you have to do”. This came up at different points in the conversation, but often around visiting the food bank.

Some participants framed the experience of visiting the Food Bank as negative because of the environment:

So, and yeah, we definitely did our food bank runs, and knew that I had that, it wasn't just a fact of having to go...it was part of the lifestyle...you had to go. And so, every two weeks, faithfully we'd go down there.....I was heart-broken a couple times, because you know, there's some folks that go there that are so mean to their kids, and I'd always be thankful for the people behind the counter that would come out, and you know, give the kids a treat, so that they could behave, and now there's a little corner for kids to read, and you know, it's good, because kids can't wait like we do, right? And, that, I think has so improved, and, just the anger, I think, was the hardest thing to face, cuz, we were all pretty angry about being so...hungry, and it's kind of embarrassing to have to go, and ask for this food, and knowing that....I mean I never, ever felt that I was getting anything that wasn't worthy of what they were giving me; I was always grateful. But there was folks who were so....bitter, and like, "Oh, this is just garbage!" At least I don't have to take it out of the dumpster, you know? So, that....still stays with me, you know? We've got some really wonderful people working there. And...the fact that they...if they only knew how hard they work to make it better, then maybe people could get rid of the anger, and maybe help out, because that's where a lot of strength comes from is where you give back, right? And, yeah....I think that was the hardest thing, is if my kids spotted something that wasn't quite nice...people fighting or the language...it's just what people do when they're in poverty, and angry, so.... (Nancy)

...you're not just going in with a bunch of other people - here's your number, here's your basket of food, see you later... there's so many people in the food bank who...I see it almost every time I'm there.....the people sit and wait, and if anybody leaves anything in their basket, they're up there grabbing it and putting it in their stuff. So, yeah - it's kind of crazy like that. (Nicole)

The anger and desperation participants witnessed at the Food Bank made it a place that they only visited if they felt they had to do so. I also asked participants how they felt about accessing the food bank in contrast to participating in the drop-in CK. The general response was that the two experiences were not at all comparable. These answers were not based on how much or the type of food that participants brought home from the food bank or CK, but how each experience made them feel:

And do I like using the food bank? No. Do I like admitting that I have to use the food bank? No. Do I do it? Yes, because I have a four-year-old to support. So, I do what I have to do to do that.... like a CK - I don't think a person is going to feel as shameful as going to the food bank. Does that make sense? Because you have that...just that sense of...you know, I have to go use the food bank. And at first I was like, I don't want people to know that I had to go to the food bank. And that's just a personal thing. And I'm sure I'm not the only one that's felt like that. But I'm over that now. And you know, I've shared that with people before too. And it's like, like I just said, I have a four-year-old to support, I'm going to do what I have to do to support him. I've had to utilize stuff that I never thought I would have to in my life. Food bank is one of those....So, that's not...that's still not comparable to here because you're coming here [the drop-in CK] and paying \$5, which still isn't a lot, but you know, you're paying that, you're talking with people, you're laughing, you're cooking your food and you're taking it home with you at the end of the night. You're not just going in with a bunch of other people - here's your number, here's your basket of food, see you later. (Nicole)

Oh, I hate the food bank! I hate the food bank. Like, it's so hard, it's so up and down. Even going to the food bank, you can't really plan, cuz you might not have the staples to

cook with it, and to me that's worse than knowing, so if I had the choice I'd go to CK.  
(Amanda)

Oh, I like the social idea, yeah. The whole idea of a food bank is totally - in my mind - totally different than a CK. I wouldn't put them in the same bank. It wouldn't be an option, "Today I'm going to go to the CK or I'm going to the food bank". It's the dire necessity, you know? That's what kinda gets me on the food bank. (Amanda)

Participants contributing their money and their time at the CK, and participating in an activity that involved mutuality and choice contrasted strongly with the feeling of shame that were initially associated with using the food bank.

Another main component of the experience of using the food bank was frustration with the lack of variety, reliability, and consistency with the food that was provided in the food hampers.

Yeah, it's inconsistent, so you can't bank on...what you're going to get, and that's kind of hard too....it's inconsistent, and of course there's no fruit and vegetables. They give you like yogurts, and proteins that way, and beans, or lentils....In the winter you get potatoes but we haven't seen potatoes for ages. (Anna)

When discussing the food bank as a way the participant obtained food, I asked Nicole if the food bank supplies her with what she needs, including, for example, food from all of the food groups. Her reply was:

Sometimes. Not all the time. There's times you go to the food bank and you get lots of potatoes, and there's time that you run out of those potatoes and you really wishing that you would have them, and then you go to the food bank cuz you really need the stuff and you end up not getting them.

It is very inconsistent. And then you get...boxes of cake mix and stuff...and it's like...how does this make sense? And there's times...there was this one time...which is really good, too...because my little guy loves yogurt, and there was one time we went there and I got six packages of yogurt, so I had 24...30 yogurt, and I was like, "Holy Crap!". Like it's

just...it's really weird. [laughs]. Or - getting the rotting food from the food bank. I'm like yeah, people need to utilize the food bank, but they don't need rotting food to be able to live. (Nicole)

The experience of risk (in not knowing what might be in an emergency food hamper), and of struggle with dignity (in being offered poor quality or inappropriate food) were highlighted in conversation on the topics of social acceptability, quality, and the food bank.

Another participant, who found that she could be very creative in the kitchen with limited ingredients, also expressed that the food bank didn't supply the staples needed to make meals from scratch, but that it was "something to make it through". In her own words:

Yeah, and then other days it's like, "What the heck am I supposed to do with this?" It's like, wow, you get a broken box of cereal. I mean, At least I always know I'm going to get 4 litres of milk; that always helps, because I've got four kids, so a litre per kid. Usually I always get the basics of milk, bread, cereal. You don't always get butter. You never get eggs, things like that. But, you know, you're guaranteed to get some canned stuff; a couple of boxes of pasta, or tuna, or something like that. So yeah, and sometimes that food will last three or four days, and other days it's like, "I can't make anything out of this!" There's the one meal in the basket, and ....so ya, somehow you make it through, and you know, payday's never that far off, or the end of the week. (Irene)

Closely related to food quality is the variety of food that composed the diets of participants and their families. When I asked participants about the variety of food in their homes, they talked about what they wanted to have vs. what they did have.

...probably not starve, but is it what we want to eat again and again and again? (Anna)

... I absolutely lived off - literally - bananas and popcorn. For three weeks....It didn't matter to me, I was busy. I wasn't a cook. I absolutely did not have the passion for it...when I'm twenty and in the workforce, than I do now when I'm feeding my family and my community. So, popcorn, because I didn't have to cook it. And bananas - I don't even like bananas.... That's all I could afford - was popcorn and bananas. No butter, no salt. [laughs] (Ellen)

During the seasons of food insecurity in participants' lives, they reported feelings of shame, compromised dignity, and frustration in the choices they faced in acquiring food, and the quality of food which was available to them, primarily through the food bank.

#### **4.1.2 Quantity**

The issue of the quantity of food in participants' homes was less notable than the other aspects of household food security. Having growing, hungry kids in the home was often mentioned when I asked participants about the quantity of food they had in their homes, and how they felt about this. The experience of the challenge of matching the supply of groceries to the demand of a hungry family was common to several participants, particularly when it came to fresh fruit.

I would love to have fresh fruit on my table every day, but, there is a lot of canned fruit, and mainly vegetables, because they're cheaper than fruit. You know, carrot sticks - you can buy a whole bag of carrots for a buck something, or a thing of celery for, you know, under two bucks normally. And it's just easier to cut them into sticks, keep them in the fridge, than it is to buy a whole bag of apples, because my kids are fruit freaks, and I can buy a whole 5 lb bag of apples, and they'll be gone the next day, along with a four litre jug of milk. So yes, we need an orchard and a cow in the backyard. [laughter] (Irene)

Participants often spoke of their ideal situation, and contrasted it with the reality that they faced:

It was a variety of things because we did have very limited...I always wanted to have fresh fruit available; a fruit bowl - I wanted to see that on my table. And, I wanted to see a turkey every holiday; that was the one thing I loved. And I wanted to have....just the cheese available cuz I knew how important that was to have for their little teeth, and milk...when they stopped the milk program, I was like, "You guys, you can't do this!", but they did. And yeah, there was a lot of times when I said, "Okay, we've got this much, and we've got to get to that date." So, I'd do my shopping weekly, and carry what I could. Lots of potatoes we had at home. Lots of hamburger, well, a fair amount.

Mushroom soup was a staple because it sort of filled the void...of cooking. Til I learned a little different way. But, it was good. Lots of pasta... (Nancy)

One aspect of the issue of quantity was having the time to prepare food: even though participants might have food in their home, they had limited time to prepare the types of meals that themselves and their families need. Amanda, who was a mother as well as a student, spoke of her frustration with finding sources of affordable protein and the challenge that was presented when she didn't have time to cook.

You can't get cooked protein. There's days I'm literally craving a steak, and it's like, you can't just go buy a steak. And the only place you can get a steak at a restaurant now, you try spending \$25 for a steak meal, like, it's just unreasonable, right. (Amanda)

Amanda also talked about how it was difficult to find the time to cook meals during the workweek, and how it was more difficult to have healthy meals towards the end of the week.

I can usually make it the first three days into the week, but come Thursday, sometimes Friday, there's bare pickings. Not that it's not there, it's just that I don't have the time, and you're so drained. So I've been cooking more on the weekend....I didn't realize how exhausted I was... So, the food and the accessibility and stuff. It's not so much the accessibility - I think it's more the time....I'm not too bad with oatmeal and stuff. But then again, it's cooking time. You know what I mean? It's the time. It's not so much the cooking, it's then the dishes after you get home, because who wants dishes at the end of your day. (Amanda)

Concerning quantity, participants mentioned “stretching” their food to make what they had last a certain time period. Though they spoke of the necessity, at times, of making an amount of food last longer than they would like, and not having time to prepare the food they had into the meals they needed, they rarely spoke of themselves or their children going without food, as would be the experience of someone who is considered severely food insecure.

#### **4.1.3 Worry and uncertainty**

Asking participants how they felt about their experiences of food insecurity is clearly a sensitive issue, and only some of the participants interviewed for this research chose to talk about it. It is worth noting that worry and uncertainty were not the only responses that participants experienced. Other responses are noted in appropriate sections, mainly under Section 4.1.6 ‘Strategy’.

Participants generally spoke of experiences of worry about food security in the past tense:

I was always pre-contemplating what's for supper, what are we going to have for lunch. And if I had empty cupboards I was a mess, because...have to have that in your home, right? And these guys were looking at me going, "Mom, we're hungry!"....I never want to see that again. (Nancy)

I have to always have at least basics. I have to have soup in my cupboard, I have to have....flour and sugar, and be able to, you know, if nothing else I can bake bread. It's just...you, when you've gone without and not known where your food is coming for your child, you have to. And it's like, it's the scariest thing. And I refuse to ever go through that again. (Emma)

I did [worry] when I was in North Battleford...yeah, I had a lot of situations where I was like, this is ridiculous.” (Renee)

Providing nutritious food for their children was often the focus of participants’ worry and concern related to food. Feelings of anxiousness, “being a mess”, and the resolve to prevent such occasions from ever reoccurring were all emotional aspects of experiences of food insecurity for these women.

#### **4.1.4 Other important themes - health**

Dealing with health conditions (of either the participant or their family, or sometimes both) of various types was an unexpected commonality in the lives of participants. This topic typically was discussed in conversations around food security, though some illnesses or health conditions were learned of through participant observation. They included (for both participants and family members): intrinsic factor deficiency, anorexia nervosa, lactose intolerance, FASD,



fused bones, cancer, ADD/special needs, behavioural issues, and a broken back. This is a long and heavy list for eight participants. One of the main influences of these health conditions on food security was limiting the ability of the participants to work, which meant limited income for everything, including food.

Nicole's words illustrate the complexity that dealing with a chronic health condition creates:

Like, the stuff with my leg happened. I'm off work. I'm still off work; I haven't been able to work in two years because of my leg. Now my other leg, and now my shoulders, and just everything just keeps going downhill, and it's like you just gotta do what you have to do, and if people can't understand that, that's their problem, that's not my problem. I'm doing what I need to do, to make some sort of living for myself and my son, and that's that. (Nicole)

Participants also talked about how having special dietary requirements, such as the need for high quality protein (as a result of intrinsic factor deficiency), and non-dairy beverages for children who were lactose intolerant, contributed extra strain on a fixed income. Participants did not discuss how their mental health affected their food security. However, several participants also mentioned – directly or indirectly – that they originally joined the CK (the drop-in CK at S20W or others) for socialization/social support, which are important aspects of mental health. The role of CKs in the promotion of social support networks is further discussed in the Discussion (Chapter 5). The obfuscated connection between food security, income, and the physical and mental health of participants and their families was the most prominent theme that arose in our conversations.

#### **4.1.5 Food skills**

The theme of food skills is where conversations about food security most often blended with the topic of CKs. Participants had various levels of food skills upon joining the CK; some who recalled joining their first CK talked about how learning to cook from scratch meant that they bought less packaged food, which helped them to save money. One participant mentioned learning how to make food “stretch” (such as adding lentils to pasta sauce) also helped to save

money. Another participant talked about basic food preparation knowledge: “I didn't know that you didn't need to peel carrots - fresh carrots. I learned that yesterday. So it was wonderful”.

Emma contrasted the strategies she learned about food shopping at the CK to the shopping practices she observed in the convenience store where she worked:

[the CK] “...educated me on how to shop...how to watch for the deals, how to realize that ok, if I buy in bulk, break it down, put it into smaller packages and freeze it, it's a lot more economical, and readily available, doing it that way.”

...so many times it's so sad. I've seen moms come into 7-11, on family allowance day, and literally buy 65 -100 dollars worth of groceries. At 7-11. Where they're going to pay a dollar for a package of Ichiban noodles. And \$2.29 for a box of Kraft dinner. And, you know, things like that. And then they're going to buy pizza pops, and pizza pockets, or whatever...pizzas...stupid things...stupid things to take home and feed their kids. Or they're going to buy them instant chicken sorta thing, you know, from the chicken program, and so they're going to spend \$40 on chicken, and it's like, really, you just spent enough for 4 or 5 meals on one snack...” (Emma)

The teaching of cooking and baking techniques such as folding in berries to a muffin batter, and making pizza dough and pasta from scratch were also observed at CKs by the researcher, sometimes featured at regular CKs, and on a few occasions taught by Roman Goodheart, the resident Chef at the Box Car Café at the time.

#### **4.1.6 Strategy**

Perhaps the most interesting and inspiring part of conversations about the experience of food insecurity was participants' willingness and enthusiasm to share about their food strategies: how they made ends meet, shopped carefully, and learned to put their organizational and creative talents to use to provide for their families, particularly on a fixed income, or a budget.

For Nancy, this involved taking a job at her children's school as a 'lunch lady' in the school cafeteria. It didn't pay well, she said, but its flexible hours allowed her to be with her

children, and "...I was so thankful for the job at the school because I knew that if there was anything extra, we would help disperse it, and I'd be part of the dispersion!"

Another participant talked about how her previous experiences of food insecurity influenced her desire to keep her pantry well-stocked, by checking flyers and buying larger quantities of items when they went on sale.

Participants showed creativity and ingenuity in various ways. One participant talked about knowing the big picture cycles of food marketing, and keeping them in mind when shopping: "I comparative shop... so I pretty much know how marketing and flyers work - like, year to year. And the changes in those. So... you never buy groceries in January. You never buy your produce the week of Christmas - like those sort of things". (Amanda)

Another participant talked in detail about how she made a conscious decision to be more organized in her grocery shopping trips, which reduced greatly her family's food waste, impulse buys, and helped her family budget and ultimately save money on their grocery bill. The same participant talked about how even the timing of her grocery trip – early in the morning – made the experience more efficient, less stressful, and in some cases, helped her find better deals:

...if I go shopping early, early in the morning, I can get more done in 40 minutes than I can in an hour and a half on Saturday at two 'o'clock in the afternoon. And I've been doing that for a long, long time, and if I happen to have to go on a long weekend, it's a gong show. It's stressful to have that kind of madness, so when I go, I mean honestly - 6, 6:30 in the morning - it's a peaceful start to my day...it's, you know, hunting and gathering by myself, I've got it done. And I'm the only one in the store, and I get all the pink stickers [indicating discount items] - that's the dream. (Ellen)

Though the experience of limited groceries brought anxiety to some participants, one participant spoke positively of the creativity she used when she had limited ingredients with which to make a meal.

I've found the lower I am on groceries the more creative I get. And the more time I spend in the kitchen. You know, looking through cookbooks, and it's like, "You know what I can make - is this, and this, and this." Because it may not have meat that day, but I've got

beans. I can throw those in the food processor. I've got cans of the five beans, the mix beans, and I'm like, "Ugh. Those are gross! I don't like eating them, not even in chili!" But then, I thought, "You know what? I can make refried beans." So, I added garlic, and seasonings, and threw it in the frying pan with, I think it was just the beans and seasonings and stuff, and made a really awesome dip. And I had taco shells. Well, I didn't have anything else to go with the taco shells. So I just baked them off and made them into chips, and we had refried bean dip; it was awesome! (Irene)

#### **4.1.7 Leadership and relationship**

The passing on of food skills knowledge, sharing food-related experiences with friends and children, and helping others increase their food security was also a prominent theme amongst several participants. One participant clearly stated that the reason she participated in the CHEP drop-in CK was to help facilitate food security in her community – she did not consider herself food insecure. She, along with other participants, talked about helping friends who were experiencing food insecurity. This was as common as participants talking about their own experience of food security. Emma talked about teaching her friend basic cooking and budgeting skills, in addition to taking her to the food bank:

And then she'll go, "Well, what can I make with this?" And it's like, ok, well here's potatoes. Here's milk. Oh, you have some onions. Let's make a potato soup. A cream of potato soup, we could do that! And she's like, "Well, how do you make that?" And so I've taught her how to make cream of potato soup, I've taught her how to make corn chowder, I've taught her how to make hamburger soup. I've taught her how to make, just like...even....a hamburger soup just with leftovers and stuff out of the fridge, sort of thing." (Emma)

Renee also took a friend to the food bank. Ellen talked about going to one of the canning workshops that CHEP offered at Station 20 West (in the summer of 2013) with one of her friends who would not have gone alone:

...in the summertime they had their food preservation class, and most of that...I certainly learned something new every time I went, but most of that I've done on my own. But I

have a girlfriend who's not very confident in the kitchen, and she's part of one of my CK meal-swaps, and so she...we decided to take it together so that she would just have a little more confidence, and... she's an entirely new cook. (Ellen)

In addition to sharing food skills knowledge and resources with friends, participants talked about the importance of passing on these skills and an appreciation for good food to their children. Nicole talked about wanting to have a community garden plot so she could teach her son where vegetables come from, and enjoy the experience of gardening together. She also talked about teaching him about other realities of their food system/situation, and discussing the difference between a trip to the food bank and a trip to the grocery store. Emma passionately brought up food preservation:

...it's a lost art. And it's something that I want to make sure my kids know how to do, and do well. So....because, you think of the price of even something as simple as canned tomatoes. And you think of the fact that, ok, there's so many people that have overgrown tomatoes, and want to get rid of tomatoes, and they will give you tomatoes, and, ok, so they've got a few bruises and aren't the beautiful ones - you wash em up, you peel em, you can em. And you've got it for soups, you've got it for everything. If nothing else, freeze em! (Emma)

Ellen talked about her children's involvement in the weekly cooking schedule, and how she hoped it would provide them with skills that they would use in the future.

My kids cook a meal once a week.... I have a thirteen-year-old and an eight-year-old. And they don't make gourmet meals, but it's healthy, and when they move out, they will - I'm hoping - understand that it's cheaper to buy four servings of grapes than it is to buy a bag of chips. You know? So what are you going to do for yourself? It's good to have a treat, but you know, there's a budget in mind. Right? (Ellen)

In addition, I observed children's participation at the Grub'N'Gab events. Children were always present for the meal; they ate with their families, and after the meal was finished, there was separate childcare available. Older children (teenagers) were often helpers at the event: they

helped set up and serve food, and assisted with clean up afterwards. They were active participants in helping provide a healthy meal to the community.

The need to provide food for one's family was the most significant reason why food security was important to the participants at CHEP's drop-in CK. Motherhood was a common experience of all participants – each participant had at least one child in their home, and at least one participant was caring for children in addition to her own. Teaching food skills to their children was important to several participants, but more basic than that was the desire to provide their family with good, nutritious food. Ellen talked about the change in her attitude towards cooking once she had a family to consider: “It didn't matter to me, I was busy. I wasn't a cook. I absolutely did not have the passion for it...when I'm twenty and in the workforce, than I do now when I'm feeding my family and my community”.

Participants also talked about the influence of the presence or absence of food skills as part of their own upbringing. Amanda talked about learning to cook on her own, through trial and error:

I've learned about cooking - well, I've been on my own since I was fifteen. I've learned about cooking hilariously through basically myself - taught myself, and mistakes....But... I expect my kids to be able to cook. It's a responsibility. And you have to teach them, if you want them to know how to cook, other than how to work a microwave, then you need to do that. People didn't even know how to do that! (Amanda)

Irene, on the other hand, grew up cooking with family members:

I've always cooked. Ever since I was little, I've always loved cooking.... Basically my mom, and my aunties, and my big sister, when I was younger, I had a big sister since I was five. We always did a lot of cooking together. Baking, and things like that, so that was always fun. (Irene)

Tied into learning to cook amongst family was the conversation of how extended family can provide a social safety net that can reduce the urgency of food insecurity. Emma talked about canning and preserving with her mother, grandmother and aunt, and also getting produce from her relatives. She also mentioned learning self-sufficiency at a young age because of a

season of financial hardship that her family experienced. Ellen also pointed out that the social support of her extended family also influenced the degree to which she experienced food insecurity:

And I absolutely lived off - literally - bananas and popcorn. For three weeks. However, when I say that, I had a family support system, that had I said to them, "Hey, I'm living off bananas and popcorn!"....

Relationships are an important part of the experience of food [in]security. The presence or absence of responsibility that comes with caring for children, learning food skills from parents, relatives and friends, and the social safety net that caring friends and relatives create are all a part of this. In addition, several CK participants were or had plans to become leaders in their own communities or social circles: some formally, through their own cooking groups, or informally, walking alongside friends to help them get food or learn to prepare it in healthy and economical ways. Relationships and leadership in their families and communities was central to the experience of food [in]security.

To summarize, the exploration of the participant experiences of food [in]security at CHEP's drop-in CK at S20W has highlighted that food [in]security is a continuum: it is dynamic, and past experiences of food insecurity were formative in strategies and practices that were currently being employed. Food security is closely tied to health and income, and food strategies are strongly influenced by relationships and leadership within the home and community.

#### **4.2 Food procurement**

Reflecting the second objective of this research, "*To discover and report the experiences of food procurement of drop-in collective kitchen participants*", the following section gathers and interprets the words and experiences of participants concerning how they obtain food. Food procurement is any method of acquiring food, including (but not limited to) grocery shopping, food bank visits, Christmas hampers, food in schools, gardening, and sharing with family and friends. Several of these have already been discussed in the first section of this chapter. Thus, the main focus of this section will be on the experience of farming/gardening and grocery shopping. Grocery shopping is discussed both generally and also specifically in relation to the

Good Food Junction. I also asked follow-up questions about the GFJ to learn more about participants' experiences of it.

#### **4.2.1 Growing food and community gardens**

Several participants mentioned growing food in our conversations. For some (Emma and Amanda), farming – growing vegetables and raising animals - was the foundation of their experience of food security as children. Emma contrasted the memory of going to her family's deep freeze that was stocked full of beef with the experience of her first year on her own when she went to buy a roast from the store and was shocked at how much it cost. She also talked about growing up with a deep freeze full of tomatoes with which she made soup from scratch. Another participant (Amanda) talked about making cottage cheese at home, because fresh milk was readily available and delivered by the milkman, and it was cheaper to make cottage cheese at home than buy it in the store.

Other participants brought up community gardens. Anna first connected with CHEP Good Food Inc because she was interested in a community garden plot. Nicole also tried to connect with a new community garden being built near her home because she wanted better access to fresh vegetables and for her son to experience tending them. At the time, Nicole also had financial and physical limitations. She did not end up getting a plot because of the prohibitive cost of seeds and other supplies, and, though there was a discussion of putting raised beds in the new Boughton Park community garden that would be easier for her to access, the raised beds were not built. She also noted the practical obstacles of vandalism and potential theft that might occur: a community garden plot was not a guaranteed source of food. Thus for only a few participants, growing food was a central part of their food procurement practices. For several others, it was an idea in which they were interested, but limitations of space, time, finances, or physical capability prevented their involvement.

#### **4.2.2 Grocery shopping**

In each interview I asked participants where they ideally liked to do their grocery shopping, and also what the reality of their typical week-to-week practices were. Participants typically had a store, or series of stores that were their regular stops for grocery shopping. Each



had a particular set of reasons for their choice, but there were some commonalities to these decisions. Cost, convenience and quality were mentioned in most interviews, in various orders of importance.

When asked where they typically shopped, and why they shopped there, several participants first mentioned cost. They talked about “best deals”, case lot sales, flyers, discounted items, shopping carefully or being on a fixed income or a budget. Nicole said, “...I go through my flyers, that's a big part of how I shop. If I find something on sale, that's where I'll go”. Some participants also mentioned the importance of being able to buy in large volumes or buy items in bulk. The stores that participants shopped at included Superstore, Wal-Mart, ExtraFoods, Costco, Co-op, Safeway, CHEP Fresh Food Markets, and the Good Food Junction.

The desire for convenience was also a common experience, but had different meanings to different participants. Some talked about stores being ‘close’ to where they lived or worked. For others, ‘close’ was on the route of where they were driving that day. Convenience was also inferred in the context of routine: it was convenient to visit the same store for every shopping trip because knowing the aisle lay-out of the store meant the participant could be quick and efficient in shopping according to her list. Convenience also took the form of the availability of convenience foods. For example, one participant preferred Superstore because of the discounted day-old salads that were often available that contained cooked protein (ham, bacon, eggs, or chicken), which was important to her diet.

When participants discussed quality as a factor that affected where they shopped, it was typically in reference to the quality of meat. Both Costco and Co-op were favoured for this.

I very rarely buy meat. If I do buy meat from a grocery store, a lot of times it's either from Costco or the Co-op. I don't like the quality of the meat at Superstore....or at Wal-Mart, ...or Giant Tiger...or any of those places where they seem better prices. I grew up on a farm. I'm used to having, you know, top grades meats, and so everything else to me, tastes like....I can't even explain it, it tastes funny... (Emma)

Though quality, particularly of meat, was important to some participants, and several chose their shopping venues based on some aspect of convenience, all of the participants spoke

of price influencing their grocery shopping decisions. The importance of price and the necessity to “shop competitively” influenced participants’ experience of the Good Food Junction.

#### **4.2.3 The Good Food Junction Co-operative Grocery Store**

When I discussed the Good Food Junction Co-operative Grocery Store (GFJ) at S20W with participants, the collective experience was that the prices at the GFJ were not low enough for participants to change shopping habits, shop regularly, or do a ‘big shop’ at the store. Though other aspects of the store were appreciated (discussed below), participants explained that there were many items they could regularly get for a lower cost elsewhere. Several participants’ sentiments were similar to Emma’s: “If.... I happen to be there, and they have a deal, but I don't find them very competitive, and I have to shop competitive. Sometimes they've got some pretty good deals there.”

#### **4.2.4 Perceptions of the Good Food Junction and price**

Two participants talked about perceptions of the Good Food Junction in the community. Nancy talked about the clients that she works with through a health promotion program with a community-based organization that works in the neighbourhood:

And the grocery store - just to touch on that. They will get used to it - they forget it's there. I don't know why - maybe because it's not Superstore, or the brand name stuff, like they are used to, you know but, it's...it's going to take a bit of time, and I know that the more people shop there, the more the signs are up there, maybe they need a big mascot that's out there going "Hey!" (Nancy)

The second participant that discussed community perceptions of the GFJ spoke of her experience working at a convenience store in the Core Neighbourhoods, and the changes she had seen since the GFJ opened:

...because of where I work, I don't work that far from here, really, and....since the grocery store has opened up here...and helped with the grocery availability for people in this community, it's made a big difference on, actually bread sales, milk sales, soup sales, stuff like that from where I work. .... We actually went back to ....the year before Station

20 opened. And went over our sales of bread and milk and stuff, per day, and especially like, well tomorrow family allowance comes out, so that's a big money day for anyone that's low income. And....so....instead of going and paying \$6.29 for 4L jug of milk at 7-11, they're coming here and paying \$5, you know. They're coming here and getting their milk and bread, they're getting their cereal...

Yes, actually, I'll have people say, "Well, you know what, we don't have to pick it up here, we'll pick it up at that green building." And I'm like, "Green building?". "Yeah, you know, that Station something." [laughs] They don't know what to call it half the time, they just know where it is, and....they're like, even Giant Tiger's probably felt a pinch with it opening over here. (Emma)

However, participants also expressed that the prices of food in the GFJ were not low enough for core neighbourhood residents to shop at the store, and as a result, it wasn't really making good food accessible to the local community. Irene said, "I have picked up a few things...I have heard, and I concur with a couple of them, that they are kind of a little over-priced. They are higher up in price; even the produce, I have found cheaper otherwise. I mean, the produce is good, but, you know, in an area like this, it doesn't really help too much." Renee felt the same, "When I went in there, the prices were a little bit...still relatively same to normal grocery store, so I wish that they could bring down the prices so for those people who are lower...low income..."

Though some participants felt that food prices at the GFJ were not low enough to serve the core neighbourhood populace, others offered alternative perspectives on the store. At an event held at Station 20 West, Ellen mentioned a conversation that came up with regards to the prices at the Good Food Junction, and why they are not, as a whole, competitive with larger retail food chains:

The one thing that I almost felt like I needed to address, but was in conversation after one of the food preservation workshops that I took at CHEP, was that the food downstairs is expensive. So then it became a discussion about why. So why is it more expensive? - Well, they don't have buying power of Loblaw's, and when you factor into the fact that maybe you have to take a cab or a bus to get to Superstore or Extra Foods or whatever, maybe if you think about that as part of your food budget, then that - you could look at it

from a different perspective. But so, so there's a bit of a ....strawberries are \$6, whereas down the road it's \$5. Well, we could only buy 12 of those, whereas Loblaw's bought 12,000, you know?

This perception is countered, in a way, with the perspective that the prices of some staple items could be higher because they are purchased out of need and/or convenience. Amanda brought this up: “Yeah, like those standard things, and they're...for this place they could actually increase those prices if you thought about it, right, like your convenience store, or your market, or whatever....but they don't, which is nice.”

Collectively, participants did not have a uniform opinion or experience of the GFJ. Some noticed a change in shopping habits of core neighbourhood residents for some items. Others thought a change might occur, but in time. Several participants felt that prices were too high for them to shop there regularly. A few had also considered why the GFJ prices were not lower, and even thought that convenience items and staples could be priced higher than they were. Though there was appreciation that the GFJ offered an alternative to buying staple foods at a convenience store, none of the participants identified the GFJ as their primary grocery store.

#### **4.2.5 Advertising**

In our discussions of the GFJ, some participants mentioned the reach (or lack thereof) that GFJ advertising had to themselves and the community. As quoted above, Nancy mentioned the need for more signs, or something else to draw people's attention to the store. Anna mentioned the email notifications she received of sales. No participant mentioned the influence of a paper (physical, as opposed to electronic) flyer as influential to their awareness of sales and promotions at the GFJ, though several mentioned that flyers influenced how they shopped for groceries. Though most of the groceries for the drop-in CK were purchased at the GFJ, the leader did not make any mention of the cost of the groceries, or make any mention of the GFJ (positive or negative) that I noted.

#### **4.2.6 Use by co-locators**

Other interactions with the GFJ besides personal grocery shopping also came up in conversation. Amanda, who was working at the Mothers' Centre at the time, spoke of her

experience as a co-locator with the GFJ. The Mothers' Centre shopped there, but to stick within their limited budgets, did not shop exclusively at the GFJ, especially for 'big shops' (purchasing large amounts of food).

Some of our participants use it, actually some of our hosts use it. I don't...they don't use it for their big grocery shoppings...it's a little costly on the budget. But it's still...we use it for the Mother's Centre. It's not too too bad, it depends what you're getting, when you're getting it. That's kinda the way it works. (Amanda)

Amanda spoke positively about the GFJ, and agreed with Nancy that it takes time to become established and for both the GFJ and Station 20 West to function optimally.

I mean, they're very good with their seasonal stuff. Their staff is very nice. So, I don't think any of those are deterrents. Like you said. But on the same point, I don't think they'll ever be that great big grocery store. I think they could do a little better in some areas. But they're trying. Really, the building has only been here a year. Some of things that are part of it are kinda...you know, expectations and understanding and, you know, technology... (Amanda)

These conversations around food procurement revealed the ideals which participants had for themselves and their families, and realities of their day to day patterns. Food procurement includes any method of acquiring food, and participants spoke of getting their food via shopping at grocery stores and CHEP Fresh Food Markets, food bank visits, Christmas hampers, CKs, food in schools, gardening, and sharing with family and friends. When it came to purchasing food, cost, convenience, and quality were all factors that were important to participants when grocery shopping, though cost was mentioned first by most participants. None of the participants listed the GFJ as their primary grocery store, and several listed cost as a reason why; they could buy food more cheaply elsewhere, and so they did. Even so, several participants viewed the store in a positive light, beyond the lack of competitive pricing.

I also wanted to understand CK participants' relationship with S20W beyond the CKs and the GFJ. The next section of this chapter explores participants' experience of S20W, other

links they had to co-locating organizations, as well as other health-promoting organizations outside of S20W.

#### ***4.3 Station 20 West, co-location, and connections to collective kitchens***

The third objective of this research was to examine if and how the co-location of organizations and programming within Station 20 West influences the experiences of collective kitchen participants. To learn about participants' experience of Station 20 West, I asked questions to spur conversation about the cooking facilities at Station 20 West – what participants thought of them, or how they compared to other places where they had attended CKs. I also asked what else they had experienced of the S20W building: the grocery store (discussed in Section 4.2) and co-locating organizations, and if they had participated in any programs or events. If so, I sought to uncover the mechanism: whether participants' interactions began with Station 20 West co-locators, or with the CK. I asked about participants' involvement with other community organizations not located at S20W. Finally, I asked participants of their experiences of changes in the core neighbourhoods since S20W opened, and their opinion of whether the changes were positive or not.

An important factor in the results presented here was that most participants were not from the core neighbourhoods. Demographic data, presented in Table 1, was not collected in the form of a survey, but most participants were willing to offer information such as marital status, number of children in their care, occupation, and neighbourhood of residence as these topics came up in conversation.

**Table 4.1 Select participant socio-demographics.**

<b>Participant Pseudonym</b>	<b>Gender</b>	<b>Occupation</b>	<b>Neighbourhood</b>	<b>Household Composition</b>	<b>Dependent Children</b>
<b>Nancy</b>	F	Community Development	Westview	Lone-parent	3
<b>Anna</b>	F	Homemaker	Sutherland	Lone-parent	1
<b>Emma</b>	F	Convenience Store Clerk	Westview	Lone-parent	2
<b>Renee</b>	F	Homemaker	Parkridge	Lone-parent	3
<b>Nicole</b>	F	Homemaker	Holiday Park	Lone-parent	1
<b>Ellen</b>	F	Homemaker	Mount Royal	Dual-parent	2
<b>Amanda</b>	F	Community Development, Student	Unknown	Unknown	1
<b>Irene</b>	F	Homemaker, Care-giver	Westview	Dual-parent	5

Because participants were not core neighbourhood residents, the natural follow-up question became, “How did you find out about the drop-in CK at S20W?”. This presented a new direction to this research objective: if S20W did not influence the food-related experiences of collective kitchen participants, what did?

The conversations were divided into three major themes: the physical CK space at S20W, S20W co-locators, and participants’ journeys to Collective Kitchens and to Station 20 West.

#### **4.3.1 The Station 20 West commercial kitchen**

In terms of the actual cooking facilities, most participants were quite appreciative of the commercial kitchen space where the CHEP drop-in CK was held. Participants that had been involved in CKs elsewhere commented on the spaciousness and the quality of equipment that was available for them to use. For example, Emma was happy to not have to bring extra cooking utensils or equipment, as was the case in other locations where CKs met.

Our facility here is 100% better than any of the other kitchens we've ever cooked in. This is a restaurant grade kitchen, whereas before we were cooking in a kitchen in the church... there maybe was two stoves, but...you maybe had to take your own graters, or knives and stuff...just the room here is so much better...like the facility is so much better, it's just ....I don't even have words for it...” (Emma)

#### **4.3.2 Co-locating organizations**

I typically began the conversation about S20W simply by asking participants what they knew about the building. Most participants had little knowledge of what went on in Station 20 West and who co-locators were, especially those located on the 2nd floor. Their experiences were not negative, but just lacking information.

I know the people in the kitchen, I know the people at the restaurant, I even know people in the store, sort of thing. But to be honest, I have no idea what the university does here. Really, no idea what QUINT does here. The other people upstairs ... [whispers] no idea. (Emma)



It is very much a mystery. Ya know, I just wonder if they have a website, like CHEP.com, or something, or you know, or like a pamphlet just to say hey, this is what's going on - kind of like the YWCA has...for programming....because I don't even know what QUINT is. There's so much that I don't know... (Renee)

I have no idea what else goes on in here....The advertising, I saw at one point, was the Good Food Junction, which is the grocery store. Other than that - not a clue. I didn't know the cafe was in here until I showed up for the first CK...or maybe, cuz I don't even think I realized it was here when I came for the Grub and Gab. (Nicole)

Some participants attributed the timing of the CK (some participants had been involved in multiple sessions of CKs, but all had most recently participated in an evening CK, that ran from 6-8pm on Wednesdays) to their awareness of S20W. Because the CK was in the evening, most co-locating organizations were not open, and at that time the Good Food Junction closed at 8pm. So on most evenings, there was nothing else “going on” in the building.

A few participants' experiences stood in contrast to the others. One participant had several involvements and interactions in the building, such as meetings with CHEP, doing childcare during CHEP events, cooking in the kitchen, and attending meetings of a group that met in the building, but was not a member of a co-locating organization. Another participant, Nancy, who works in the neighbourhood doing health promotion for a non-profit, talked about using the kitchen at S20W as part of a Mother's Centre (one of the co-locators) event with a sense of inclusion. She also saw it as part of her role to make connections to co-locators, and to help others make connections as well: “I feel that I do what I can to get people introduced to the co-locators there [S20W].” Nancy also sensed a disconnect from the University of Saskatchewan Office of Outreach and Engagement, and wondered aloud why that could be:

...I think the hardest one for people to get involved with is the university...and I don't know why, 'cuz even myself, I kind of forget about them. They're way at the back, and I know Don [Bear] works there, and he's just a great face to see, but we just don't connect, I mean they've had some wonderful teachings and opportunities, but...the people I work with right now, aren't really gravitating towards them. My co-workers are, which is really good.

She felt the teaching and learning opportunities, such as having dietitians present near the store when people were shopping, and the demonstrations, such as the “Three Sisters” plot of corn, beans, and squash outside the building was helping S20W accomplish what she perceived to be its goals. She also spoke of a multiple ways that she experienced accessibility at S20W: accessibility to health care professionals, through the presence of dietitians at the grocery store, but also physical accessibility throughout the building via the elevator to the second floor. Overall, Nancy saw S20W as a positive change for core neighbourhoods, “... I think there's a lot more people just going, ‘Hey, this is our place!’ And I know there will be people that don't feel that way, but the majority of folks that I know and talk to, they really like S20.”

Another CK participant, Amanda, at the time of the interview was working with a co-locator, and talked about her experience of S20W as one of learning what it means to be a co-locator and of forging relationships.

I'm still learning, because even though... In the building, like they're kinda sectioned in really good diverse groups. I still don't know what they do, necessarily. So you might have one office, but it could be running a whole different program.... So we're learning, a little bit. And just the person that I am, I'm always at QUINT, "Okay, how do I do this? How do I do this? How do I do this?" And so that's kind of the forging... but it's co-locators, and it's like, "Who's in charge of the co-locators? Well, I'm part of the co-locators! Oh yeah, right!"

The participants who were interviewed for this research did not have a uniform experience of S20W, other than their appreciation for the commercial kitchen cooking space where the CK was held. Their level of involvement with and awareness of S20W varied, from being quite knowledgeable about the co-locating organizations, to visiting occasionally for specific meetings or CHEP events, to having little interaction with the building and co-locating organizations other than attending the drop-in CKs. Several participants attributed the timing (in the evening) and location (near the building entrance, so they didn't have to navigate their way through the building) of the drop-in CK to their lack of knowledge of S20W as a whole. However, each participant had a reason for being at the drop-in CK; a connection from outside of

S20W, as opposed to within the social enterprise centre, which brought them there. The following section explores these connections.

### **4.3.3 Collective kitchen connections**

For the majority of participants, it is clear that it is not necessarily through a previous relationship or experience with S20W that they learned of and participated in the drop in CK there. This warrants exploring the paths and venues/experiences through which CK participants did come to participate in the CK.

These journeys varied, though none of them shared a previous experience with S20W. In fact, the journey to the S20W CK, and CKs in general, often had less to do with food – directly – and more to do with friendship, isolation, community, opportunities to socialize, and fun. Connections with CKs began as connections with school communities, extensions of health care services, and other helping agencies, as well as social media. Each of these is explored further in the following four sections.

#### ***4.3.3.1 Health care related connections***

Nancy's introduction to CKs was through the Food for Thought program, an initiative of the Saskatoon Health Region. As described on the program's webpage ([https://www.saskatoonhealthregion.ca/locations\\_services/Services/Primary-Health/Pages/Foodforthought.aspx](https://www.saskatoonhealthregion.ca/locations_services/Services/Primary-Health/Pages/Foodforthought.aspx)):

Food for Thought is a prenatal support program that assists women and their children to achieve improved health. With a focus on cooking low-cost nutritious food, women come together and have an opportunity to share ideas, make friends, and talk about their lives. The food that is cooked is sent home with the participants to be shared with their families. A participant-driven discussion on topics related to pregnancy follows each cooking session. The interdisciplinary team, who facilitate the program, use a strength-based approach in all their interactions with the participants and Peer Leaders.

As Nancy describes her initial introduction to the program in 2003:

It was probably way back in....2003 when I was pregnant with [child's name], and she's nine now...(laughs)...I was with the Food for Thought group, I was very happy to be a part of that group; they broke a lot of the walls down, and the isolation that I was living in, and they got me there in one piece with a taxi ride...

Renee's connection was through the Coordinated Case Management Initiative:

I actually heard it through...it's called a case load manager....she works through Child and Youth Services, and she told me, "Listen, try this." Cuz I wanted to try something different right, and get out and in the community....cuz like I said I'm new, and it's new so...just to access things is hard...like Kids First, well my kids are out of Kids First now cuz the only go to 0 to 5. So 5 years, so once you ...that's exactly what happened to me, hey, I went from, it's called Early Childhood Intervention Program, and I had that, I had Kids First, I had Parent Mentoring, I had a lot of support back in North Battleford, but once they hit that certain age... ya know, it's gone. (Renee)

Kids First and the Coordinated Case Management Initiative were also involved in Nicole's relationship with CKs.

Originally I had done a CK for Kids First, at - I guess it would be West Winds, cuz they were still at the church. On 20th [St. Thomas Wesley United Church].... That was my first one through there, and then, through another program, now, is when I heard about this one.....more through health services...and she basically referred me...or...told me about CKs, just for me to get out to socialize, it actually had nothing to do with healthy food. It was just for me to get out and meet people, cuz I don't know a whole lot of people in the city. So, the healthy food, cooking is just kind of a bonus of that. (Nicole)

#### ***4.3.3.2 Community organization connections***

For Anna, it was an initial interest in community gardens that connected her with CHEP, and eventually with the CK program through a pamphlet that she picked up at the food bank: "...it was a listing of all kinds of services, and CHEP was in there. I first grabbed it because they had community gardens, and then they had all the other things they were doing and I called Janet and said I'd like to volunteer and that's how that got going..."

Amanda's involvement at Central Urban Metis Federation Incorporated (CUMFI) doing food-related work was the starting point for meeting Janet, taking the CK Leadership and Food Safe Training, and then attending the drop-in CK. When I asked her what her connection point was, she said,

I guess it would be through a friend that suggested that I come to a CK, cuz, I'm involved at CUMFI ... And I got encouraged to meet Janet who runs the CKs and stuff, and she ...we had met somewhere and she liked me... Not that it was about liking, though, it was an understanding. So I took my Food Safe course, and then I'd taken the Community Kitchen Leadership Class, and because I kinda do that over at CUMFI... and then so I went and it was actually a lot of fun, so then she goes, "Well, we have this kitchen, this drop-in kitchen," ...And I went, and I liked it.

#### ***4.3.3.3 School connections***

Both Emma and Irene had long-standing involvement with CKs that began when their children started school.

Oh, my very first time at a CK was at Bishop Klein school, my son was in pre K, and I was asked if I wanted to join a CK.... And so then, the leader that we had then, she actually did it that we would do a main dish, a salad, and a dessert, so we had an entire meal that was already prepared for when we got home, and we had it with our children, it was wonderful. We got to try new things that we normally wouldn't have tried. Got to have socialization with the other ladies, got to meet people in my kids' school that I never would have had the opportunity to meet otherwise. And, that's actually where I also learned about the Grub and Gab. (Emma)

When my boys were in preschool, at the Madeline Dumont preschool - Aboriginal Headstart at Cosmo Civic Centre, which would have been - ... I was pregnant with my daughter at the time, and she turns 11 right away. So yeah, almost 12 years. There was a cooking group, so they asked if I wanted to join, 'cuz I was on parent council, so I said yeah, and it was a lot of fun. We did...we just walked across the street, and did shopping together as a group, and did cooking together, and Janet actually, was my leader at that point too, so I met her almost 12 years ago. (Irene)

#### **4.3.3.4 Social media connections**

Ellen's interest in cooking and community involvement was piqued by a blog article that she read. It extended her own practice of monthly make-ahead meals into the greater community.

The CK...how I specifically got to the CHEP CK was by ...I'm a fan of a blog called Wander...Wanderlust and Words (<http://wanderlustandwords.blogspot.ca/>), and she had a blurb on it, and so that is where I first heard about it - I of course knew about CHEP, but that is first where I heard about the drop-in kitchen, and that all ...learning about that and that kind of thing. Now, my own....for my own personal involvement, it started when I became a member of my community association in Mount Royal, I have always been someone who plans ahead for my meals, and have been involved in her community, and when that, sort of, in the course of natural conversation came out, people asked if they could tag along, and I said, "Absolutely!". And so it exploded into a monthly make-ahead CK in my house....and it turns out that what I had been doing in my kitchen for the last...I just found my notes from 2008, for a matter of fact...is exactly how they had facilitated CK through CHEP. Pretty much exactly, yeah. (Ellen)

The stories of connecting with the drop-in CK at S20W make it clear that the relationship to the CK did not begin at S20W. Instead, these stories show that other organizations and communities utilize CKs to widen and strengthen the social networks of clients and members. This is further explored in the discussion in chapter five.

#### **4.4 Summary**

To summarize, the experiences of participants in this research have shown that food [in]security is a continuum: it is dynamic, and past experiences of food insecurity are formative in strategies and practices that were currently being employed. Food security is closely tied to health and income; food strategies are strongly influenced by relationships and leadership within the home and community. The experiences of food procurement included many ways of acquiring food, but primarily highlighted grocery shopping. Cost, as well as convenience and quality were described by participants as important factors to participants when grocery shopping. In relation to their experience of the GFJ, most participants mentioned the higher cost of most foods at the GFJ relative to other stores, as well as the closer proximity of food stores in

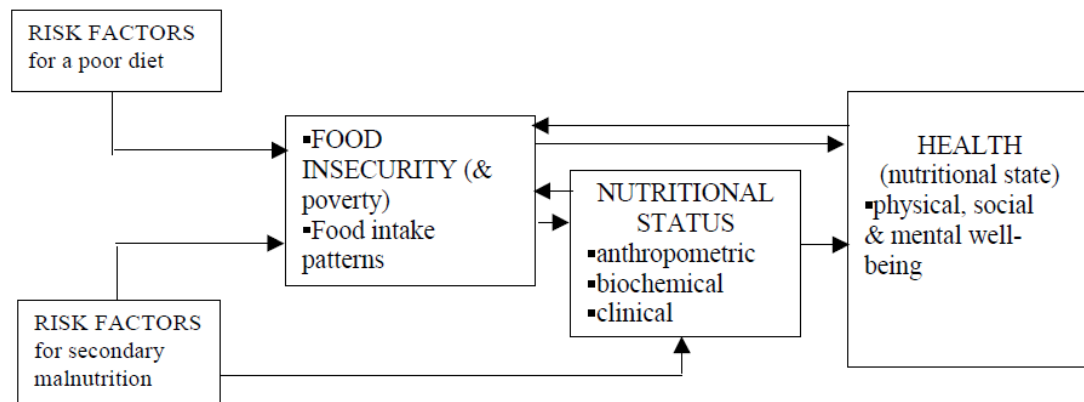
their neighbourhoods, as reasons they did not shop at the GFJ. The majority of participants that were interviewed did not live in the core neighbourhoods, and so this influenced their relationship with S20W. All of the participants appreciated the new commercial kitchen space where the CK was held, otherwise their involvement with and awareness of S20W varied. Participants did not join the drop-in CK because of a previous relationship with S20W, their connections began with school communities, extensions of health care services, community organizations, and social media. This finding is important because it highlights S20W's role in Saskatoon's integrated health interventions, and is discussed in the following chapters.

## 5 DISCUSSION

What follows in this chapter is an examination and analysis of the findings of this research in relation to what is already known about food [in]security, food environments, foodways, and CKs. It compares the experiences of the participants here in Saskatoon, SK, to those documented elsewhere, and highlights commonalities, divergence, and trends. It uses the Logical Status of Nutrition-Related Indicators (Campbell, 1991, Runnels et al., 2011), as well as adaptations to the Community Nutrition Environment Model to examine these relationships.

### Food security is closely tied to health and income

The first objective of this research was to describe and analyze drop-in collective kitchen participants' experience of food [in]security. The experiences of these participants highlight that food security is usually closely tied to health and income, the former often influencing the latter. It has been explored previously that food insecurity is associated with poor health (Campbell, 1991, Vozoris & Tarasuk, 2003; Runnels et al., 2011). In their exploration of the experience and effects of food insecurity in Ottawa, Runnels et al. (2011) adapt the model proposed by Campbell (1991) of 'Logical Status of Nutrition-Related Indicators' to show the bi-directional relationship between health and food insecurity, as in the figure below.



*Note.* Adapted from Campbell (1991).

**Figure 5.1 Direct and indirect relationships of food insecurity and health (Runnels et al., 2011).**



In my research findings, dealing with health conditions (of either the participant or their family, or sometimes both) of various types was common to the experience of almost all of the participants. For some, this limited participants' ability to work, which meant they had a limited budget for all their needs, including food. Participants who said they would like to be more food secure were all dealing with significant health conditions. For them, the health of themselves and their children was closely linked to their food security. Income, disability, food insecurity and access to health services are all considered social determinants of health (SDoH), which are discussed in Chapter 6: 'Critical Reflections'.

### **Food security is dynamic, and foodways are complex**

In the experiences of CK participants at S20W, food [in]security is dynamic, and past experiences of food insecurity are formative in strategies and practices (foodways) that were currently being employed. For several participants, CKs were an ongoing part of their foodways. Participants were very enthusiastic in sharing about their foodways: how they made ends meet, shopped carefully, and learned to put their organizational and creative talents to use to provide for their families, particularly on a fixed income, or a budget. The observation that people with fixed incomes develop complex foodways is consistent with other literature. In their work exploring the food purchasing practices of low-income families in Toronto, Dachner et al. (2010) found similar practices to Saskatoon CK participants:

To stretch their food dollars, respondents reported using a number of strategies at home: making food from scratch, getting creative with leftovers, using fillers to stretch meals (e.g., adding potatoes and carrots to chicken or flour to stew), and using canned foods. At the grocery store, economizing strategies included sticking to a fixed budget, using shopping lists, coupons, and flyers, purchasing sale items, comparison shopping, and buying in bulk.

Alkon et al. (2013) also emphasized the complexity and creativity that marginalized and low-income people use when procuring food. The Chicago residents with whom they spoke explained that they would go to particular stores to get certain items, and were very aware of sales. In addition, Alkon et al. noted that, as with the participants in this research, the foodways

of their participants were not lived out as isolated individuals, but “...as people embedded in social relationships of reciprocity and obligation” (2013, p. 131). This was also observed in this research: participants chose to shop at certain stores based on items they needed for their families, they exchanged food with family members, took friends to the food bank, and spoke of their dedication to providing healthy meals for their family. It is important to note that there is often a web of considerations for any shopping decision or food strategy.

### **Grocery shopping and the Good Food Junction**

A second objective of this research was to discover and report the experiences of food procurement of drop-in collective kitchen participants. As stated in Section 4.2, cost was the primary decision-making influence in grocery shopping, followed by convenience and quality. The priorities of these CK participants are similar to those documented elsewhere: according to Dachner et al. (2010), for Toronto low-income families, price was the most significant influence in purchasing decisions, and the greater level of food insecurity the family faced, the more likely they were to report price as their decision making factor in food purchases.

Participants’ experience of the GFJ was that it lacked competitive pricing when compared to the other stores they chose to patronize. Even though some participants appreciated other things about the GFJ (such as good service or that it made fresh food available to the core neighbourhoods), it was perceived as too expensive to do big shops or be a primary grocery store. Additionally, the GFJ was not necessarily a convenient place to grocery shop because most of the participants did not live in the core neighbourhoods. The fact that this research did not reflect the experiences of core neighbourhood residents of Saskatoon, because most participants were from neighbourhoods outside this catchment area, is a limitation of this research. However, complementary to the data gathered in this research are the recent findings of Fuller, Engler-Stringer, and Muhajarine (2015) and Lotoski, Engler-Stringer, and Muhajarine (2015) in the work they have done, as part of a larger multi-year study, to examine food purchasing patterns of residents and non-residents of Saskatoon’s core neighbourhoods.

The work of Lotoski et al. (2015) studied the awareness and use of the GFJ by surrounding core neighbourhood residents. They found that the GFJ *was* the primary grocery

store of *some* core neighbourhood residents, and that the store played an important role for those who walked as their mode of transportation to buy food. They reported that, of the population interviewed, 8.2% stated that the GFJ was their primary grocery store, and Aboriginal people were significantly more likely to comprise this 8.2%. They also found that 80% of those surveyed who had stated that the GFJ was their primary grocery store walked both to and from the store. This demonstrates that access to a vehicle is also an influential factor in where people choose to shop: over half of core neighbourhood respondents who shopped elsewhere had a personal vehicle.

The work of Fuller et al. (2015) examined sales data and the postal codes of GFJ shoppers. They found that those who live within the core neighbourhoods *are* shopping at the GFJ, and that their purchasing habits are different than GFJ shoppers who live outside the core neighbourhoods. Core neighbourhood residents spend more money on fruits and vegetables than they do on meat or on prepared foods compared to non-core neighbourhood shoppers. According to Fuller et al. 2014, this data shows that when given access to fresh fruits and vegetables (a proxy of healthy food), residents of a former food desert will take advantage of that access.

It was not participants' experience that the GFJ met their needs for competitive grocery prices or convenience. However, because the overwhelming majority of those interviewed for this project lived outside the core neighbourhoods, their shopping habits do not necessarily reflect those of the people who live in the neighbourhoods surrounding S20W. Some core neighbourhood residents do consider the GFJ their primary grocery store, and it particularly serves those who walk to get their groceries. It has also been shown that those who live in the core neighbourhoods are buying different foods – what appear to be healthier foods – than those who live outside the catchment area.

### **Collective kitchens, social support, and the role of Station 20 West in Saskatoon's integrated health interventions**

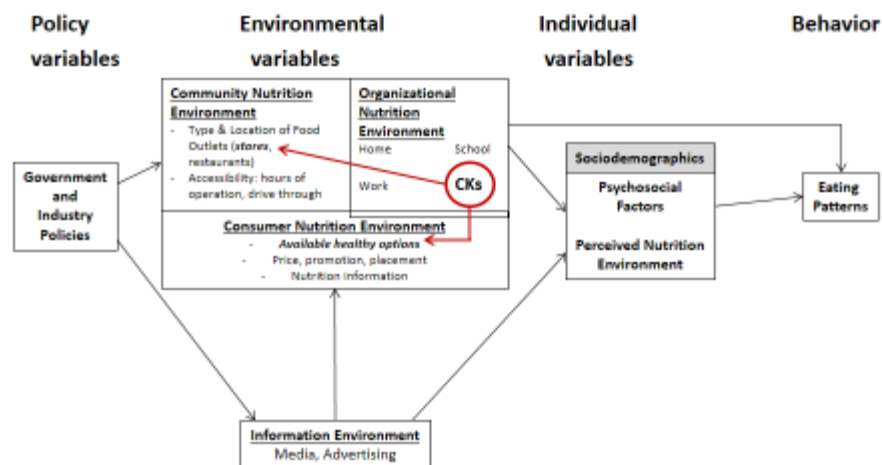
Due to participants' limited involvement with the GFJ and other S20W co-locators, the experiences articulated in this research do not offer as much information on the changes to the core neighbourhoods' food environment as originally expected. The opening of the GFJ was not a significant influence on their personal food environments because most participants were not

from the core neighbourhoods, and had access to a vehicle, or had a grocery store within walking distance of their homes. These findings do, however, lead to another question: why did participants come from outside their own neighbourhoods to attend this particular CK?

Most participants had limited knowledge of and interactions with S20W co-locators (aside from CHEP). However, they did have connections with other organizations and groups that connected them with the drop-in CK. This draws attention to the numerous agencies and institutions that value CKs as a resource to provide clients with a potential source of social support. Involvement in CKs has already "...been shown to foster self-confidence, self-esteem, skill-building, social support, stress reduction, awareness of community resources, and food security." (Engler-Stringer & Berenbaum, 2007a, p. 91). Starting with a theoretical framework focusing on health promotion and food security, themes that emerged in the work of Engler-Stringer and Berenbaum (2007a) highlighted the importance of the social aspects of participation. Fano et al. (2004) also found that the social support experienced in the CK program was important: the most common reason that members gave for joining the CK was for social interaction and support. The work of Racine & St. Onge (2000) reported that the hope of feeling less isolated was a common psychosocial reason why participants joined the CK. Because of these findings, Engler-Stringer (2007) makes the case that "...a focus on the social aspects of participation could maximize the benefits of collective kitchens without detracting from the importance of food security and education". The results of this research agree with her position.

In addition, the fact that CK participants were coming from outside the core neighbourhoods highlights the role of S20W in a network of integrated health services/interventions that serve all of Saskatoon. The drop-in CK is a point of connection for formal health region programming (Food for Thought, Kids First, Coordinated Case Management), community organizations (CHEP, CUMFI), and schools, particularly community schools. This is the kind of collaboration that was called for in the 2008 report that recommended evidence based policy options to reduce health disparities: "The Saskatoon Health Region should offer integrated and comprehensive services in Saskatoon's low income neighbourhoods including public health, mental health, addictions and primary care services" (Lemstra & Neudorf, 2008, p. 318).

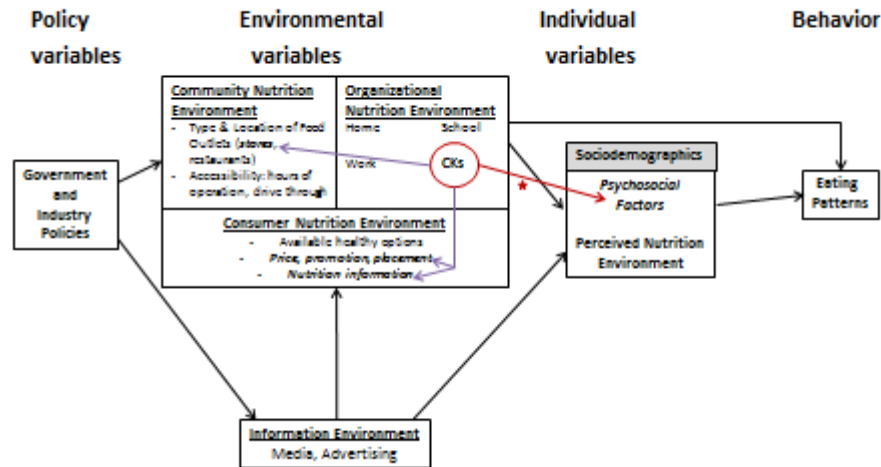
Understanding CKs as a program that offers social support, in tandem with supporting food security and education may require a shift in focus, or a more holistic understanding of food security and nutrition. My own perceptions have changed as a result of this research. In relation to the Community Nutrition Environments model, I initially understood the drop-in CK as a component of the organizational nutrition environment that might influence participants' community nutrition environment, by way of promoting or increasing access to the GFJ. I also thought that the CK was important to improve consumer nutrition environment via the food that CK participants took home from each session. In Figure 5.2, I have added these emphases to Glanz et al.'s original model below (2005).



**Figure 5.2 Model of Community Nutrition Environments: CK Assumptions (modified from Glanz et al., 2005)**

However, based on the experiences of the participants interviewed in this research, the drop-in CK's most important contribution was to psychosocial factors – by way of friendship, reduced isolation, community building, opportunities to socialize, and fun (Figure 5.3). After learning about the reasons participants came to the CK, and the limited interaction with S20W of most participants, the role of the CK in contributing to the information environment in the future could have an impact on participants' consumer and community nutrition environments, as well as other aspects of their well-being not captured in the Community Nutrition Environment Model. For example, the drop-in CK leader could briefly highlight sales or specials at the GFJ,

and upcoming events happening at S20W that might be of interest to participants. These suggestions are further explored at the end of the following chapter.



**Figure 5.3 Model of Community Nutrition Environments: CK Current and potential influences (modified from Glanz et al. 2005)**

## 6 CRITICAL REFLECTIONS

In reflection upon the themes that emerged from the stories of participants, it is evident that food security is only one aspect of CKs that draws attendance and impacts participants. Returning to the literature after the theme of social support emerged, it was clear that the literature reflects this also: the importance of social support has been widely documented (Engler-Stringer & Berenbaum, 2005, Engler-Stringer & Berenbaum, 2007a, Fano et al., 2004). The intent of this research was to explore food environments, particularly the changes in the food environment in Saskatoon's core neighbourhoods after the opening of the GFJ and S20W. However, had I paid closer attention to the whole of the literature I was reviewing, rather than on honing in on food security-related findings, I might have broadened my initial lens. Food security is embedded in numerous, interconnected issues, several of which are addressed by CKs, to some degree, such as social support, disability, and education. The social determinants of health are a useful framework in understanding other factors that act on participants' food security, as explained in the following section.

### 6.1 *Social determinants of health*

Health is significantly influenced by the living conditions that are experienced in daily life, more so than lifestyle choices or visits to health care providers. These conditions are termed the social determinants of health (SDoH) (Mikkonen & Raphael, 2010). Though there are various models of the SDoH, the following list has been used extensively to explain why the health of Canadians varies (Raphael, 2009):

The 14 social determinants of health in this model are:

Aboriginal status	gender
Disability	housing
early life	income and income distribution
education	race
employment & working conditions	social exclusion
food insecurity	social safety net

Using a slightly different list than the one above, Engler-Stringer reviews the literature on CKs for their potential impacts on the SDoH (2005). She reports the likelihood of education, social support networks, personal health practices and coping skills, and childhood development to be positively affected by CKs. My findings agree with this literature summary; participants particularly mentioned education and social support networks.

According to Mikkonen & Raphael (2010), “There is much evidence that the quality of the social determinants of health Canadians experience helps explain the wide health inequalities that exist among Canadians.” This statement is demonstrated by the health disparities between high and low income neighbourhoods in Saskatoon, highlighted by Lemstra, Neudorf and Opondo in their paper, ‘Health disparity by neighbourhood income’ (2006). They report, “Statistically significant differences by neighbourhood income status were observed for: a) healthcare utilization for suicide attempts, mental disorders, injuries and poisonings, diabetes, chronic obstructive pulmonary disease, coronary heart disease, and b) in the incidence of chlamydia, gonorrhea, hepatitis C, teen birth, low birth weight, infant mortality and all-cause mortality.” (p. 435). Their report indicates that the neighbourhoods surrounding S20W are all low-income neighbourhoods to which these statistics apply.

Understanding food security as a SDoH that is intricately connected to other SDoH was helpful for me, as a researcher working and studying in the core neighbourhoods, to make sense of the social context of my surroundings. To be true to van Manen’s framework and “balancing the research context by considering parts and whole” (p. 34), I aimed to understand the foodways of the participants of this research in the context of limitations such as disability, poor social support, insufficient income, and other SDoH. These factors all contributed to their experience of food [in]security, and placing them in the framework of the SDoH has implications for policy and action, as outlined in Chapter 7. Phenomenology has been a useful tool in capturing this complexity and making these links.



## **6.2 *Reflections on phenomenology***

As I approached this research, my focus was food [in]security in the context of food environments research, but as I spent more time with the data, it became evident that when using a phenomenological perspective, the experiences that participants shared blur the lines of intersectionality between food [in]security and other SDoH. This is a strength of qualitative methodology: it illuminates the complexity that can be reduced by other methods. The essence of people's experiences is deep and thick data, and brings texture and illumination to quantitative findings. A strength of this project in particular is that it may provide richness and complementarity to other research investigating the changes in the food environment of Saskatoon's core neighbourhoods since the opening of the GFJ. In addition, it builds on the work collected for the Good Food Junction Baseline Data Report, which contains both quantitative and qualitative data on Saskatoon's food environment prior to the opening of the GFJ (Miazdyck-Shield, 2012). Even so, phenomenology does not always answer the question as directly as the researcher might expect. The questions that remain, as well as new ones that have surfaced, in addition to suggestions for practice and policy follow in the next chapter.

## 7 IMPLICATIONS FOR RESEARCH, PRACTICE and POLICY

### 7.1 *Limitations and future research*

There are several directions this research could have taken that were not in the scope of a master's thesis, but could be posed as new questions for further research. As mentioned above, almost all of the participants who were interviewed lived outside of the core neighbourhoods. This was a limitation of the inclusion criteria; without specific criteria to select only participants who lived in the core neighbourhoods, the food environments in which the eight participants lived extended beyond this area. It is unknown if other drop-in CK participants were from the core neighbourhoods or not. Though seeking social support may be why participants were coming from outside the core neighbourhoods, it should be questioned why participants were *not* coming from *within* the core neighbourhoods.

It would also be worthwhile to explore what services and programs core neighbourhood residents *are* accessing at S20W. Though many programs may not have geographical requirements for participation, it has been observed that the core neighbourhoods are a “medical hotspot”, or a specific geographical area where residents have the greatest costs to the public health care system (CBC, 2012). The co-locating organizations at S20W offer programs and services to improve the quality of life of participants. Questions that need answering include: To what extent are they being used? Are they improving the quality of life for participants in measurable ways? Are there barriers that need to be addressed in order for them to do so? Are there other programs in the core neighbourhoods that are more accessible to residents than the drop-in CK?

This study would have been strengthened by greater attention to aspects of culture and gender. Though it was intended when creating the interview guide to address cultural aspects of food security (i.e. “Do you have land that you visit to get traditional foods?” or, “Do you have enough of the traditional foods of your home country/culture?”), most participants' comments on this subject were not substantial enough to form a theme in the ‘Results’ chapter. It would also have been helpful to ask about cultural status more directly (i.e. “Do you identify as First Nations/Inuit/Metis?” or, “Have you always lived in Canada, and if not, what is your country of origin and how long have you lived here?”). Similarly, the interview guide could have asked

questions more directly about gender and family status and its role in food security and social support in the lives of participants.

Another limitation of this study is that it is program-specific. The drop-in CK is just one of many programs that happen regularly at S20W. If participants from another co-locator program were asked about the same topics, different information may have been gleaned, especially if participants were from the core neighbourhoods. In addition, this research is an initial snapshot – a limited window of time, spanning only 8-15 months after the grand opening of S20W. As people adapt to the changes in the food environment, their practices may also change. Further research on the changes over time in the foodways of those who interact with S20W is necessary to understanding the longer-term effects of a food store opening in a former food desert.

## **7.2 *Suggestions for practice***

It is an important finding that the CK participants who were interviewed for this research were mostly coming from outside the core neighbourhoods. The drop-in CK was found to be a point of connection to health region programming, community organizations, and schools. As such, the program is a gateway to Station 20 West, and a possible connection point to other programs and services provided by the co-locating organizations. Co-locators could use this opportunity to cross-promote programs and events of interest at the CK cooking session (Aside from the mention of CHEP's Good Food Box program, I did not observe any cross-promotion of other programs during the CK cooking sessions that were attended). Another method of cross-promotion might be a newsletter or flyer to advertise upcoming programs and events at S20W. If the staff time and financial resources were available, this could be a way to realize some of the synergies that the planners of Station 20 West hoped to create (<http://station20west.org/partners.html>). It was also observed that many posters for events, programs and opportunities are posted on the bulletin boards on the second level of Station 20 West; there is less bulletin board space on the lower level, and several participants reported never venturing up the stairs, so it is possible that these posters are not reaching the intended audience. A newsletter could also help to advertise these occasions to a broader audience.

If CK participants are coming from other neighbourhoods, it also raises the question of whether or not the drop-in CK is servicing core neighbourhood residents. The researcher did not observe any advertising other than a poster at Station 20 West on the second floor of the building. If engaging more core neighbourhood participants were an objective of the program, then CHEP might consider increased advertising within the core neighbourhoods. CHEP might also look to increase cross-promotion within the programs that it offers (Kids Kitchen, Good Food Box, Grub’N’Gabs, Community Garden networks) through program newsletters and events.

Additionally, programs run by community organizations are often under-resourced. CKs other than the drop-in CK at S20W, which is funded by the Collective Kitchen Partnership (and the participants’ fee of five dollars per session), must find their own funding to match the funding available to them via the CKP. It is important that CKs are promoted if they are to provide social support to participants. It is very possible for a CK to have a variety of themes or emphases while still providing “...self-confidence, self-esteem, skill-building, social support, stress reduction, awareness of community resources, and food security.” (Engler-Stringer & Berenbaum, 2007a).

These findings pose may offer insights for practitioners involved in Collective Kitchens, and Station 20 West, or others that work at the intersection of community based food programs and health promotion. However, I also recognize that there are many constraints within organizations that may prevent them from acting on such suggestions; indeed, they may already be aware of some of these findings.

### **7.3 Policy considerations**

In this research project, any participant who identified as currently experiencing elements of food insecurity was also experiencing poor health (either themselves or their children). The SDoH framework highlights the interconnectedness of the conditions that affect our health as a society, and can make visible that policies which enhance one SDoH may also enhance others. In the 2014 Speech from the Throne, the Saskatchewan Provincial government recently announced the development of a Poverty Reduction Strategy. Previous to this, Saskatchewan and British Columbia were the only two provinces in Canada to not have comprehensive poverty reduction

strategies (Plante & Sharp, 2014). According to Mikkonen & Raphael (2010), “More equal income distribution has proven to be one of the best predictors of better overall health of a society.” (p. 12). Addressing adequate income, through a guaranteed minimum income plan, for example, could be one way of implementing this promise from the provincial government. This pledge could be a step forward in addressing the social circumstances that collectively contribute to poor health, but it needs to be implemented promptly and thoughtfully to reverse the trends of poor health in lower-income neighbourhoods that are observed in Saskatoon.

Though larger systemic changes are needed, addressing systemic causes of poor health does not eliminate the need for grass-roots programs such as the CK. Social support and community are needs that we all have, regardless of income or food security status. Nearly all CK participants who were interviewed wished for more CKs, with better advertising and increased accessibility. The existing research shows CKs to contribute to several SDoH – including food security and social support – and it is important that health promotion institutions and community organizations are aware of the many potential benefits of CKs. CKs should be well-funded to allow growth of the program, and to make subsidies available to groups so that barriers such as transportation and childcare are not limiting to participants. Programs that subsidize some food costs to reduce the financial burden of participants, but still require participants to contribute, through labour and/or fees will cultivate a sense of belonging and foster dignity that differentiates participation in the CK from a trip to the food bank.

## 8 CONCLUSION

The purpose of this study was to explore how Station 20 West might influence the experience of food security of CHEP's drop-in collective kitchen participants. The study was a snapshot of the impacts on the lives of a small group of people in a changing food environment: a former food desert in Saskatoon, SK – a mid-sized Canadian city. Responsive interviews were analyzed through a phenomenological approach to gather the experiences of eight collective kitchen participants who took part in CHEP's drop-in CK at S20W. The interviews were coded and themes were developed as per van Manen's Methodical Structure of Human Science Research (van Manen, 1990).

The findings of this research illuminated the complexity of food [in]security. Participants' experiences of food [in]security were often linked to the health of themselves and their families. Additionally, they highlighted that food [in]security is a dynamic continuum, and past experiences of food insecurity are formative in foodways that are later employed.

CHEP's drop-in CK at S20W is a potential gateway to other organizations and services available at Station 20 West, and may not be currently viewed as such by CHEP or other co-locators. Cross-promotion of co-locator programs and services, as well as promotion of the GFJ, through newsletters, flyers, and more accessible advertising could increase awareness of the opportunities available, as well as synergy between co-locators.

Because most of the participants that were interviewed did not live in the core neighbourhoods, this research did not contribute significantly to the understanding of how changes to this food environment have been experienced by core neighbourhood residents. However, it did discover that other community organizations and health promotion programs are referring participants to the drop-in CK, sometimes as a potential source of social support. It is important that CKs be recognized and promoted for all of the ways in which they address the SDoH, not only food security. This recognition should occur at all levels of policy making – community, municipal, provincial, and federal – if we are to move towards a more food secure and healthy society.

## 9 REFERENCES

- Alkon, A. H., Block, D., Moore, K., Gillis, C., DiNuccio, N., & Chavez, N. (2013) Foodways of the urban poor. *Geoforum*, 48, 126–135.
- Campbell, C. (1991). Food insecurity: a nutritional outcome or a predictor variable? *The Journal of Nutrition*, 121, 408-415, 1991.
- Canadian Broadcasting Corporation. (2012, November 30). Medical Hotspot: Saskatoon, Saskatchewan. *White Coat, Black Art* [Radio]. Retrieved from:  
<http://www.cbc.ca/player/Radio/White+Coat+Black+Art/Full+Episodes/2012/ID/2311645481/>
- Cannuscio, C., Weiss, E., & Asch, D. (2010). The contribution of urban foodways to health disparities. *Journal of Urban Health*, 87(3), 381-393.
- Collective Kitchen Partnership. (2004). Handout. Saskatoon: Collective Kitchen Partnership.
- Coates, J., Frongillo, E.A., Rogers, B.L., Webb, P., Wilde, P.E., & Houser, R. (2006). Commonalities in the experience of household food insecurity across cultures: what measures are missing? *The Journal of Nutrition*, 136, 1438S-1448S.
- Crawford S, Kalina L. (1997). Building food security through health promotion: community kitchens. *Journal of the Canadian Dietetic Association*, 58(4), 197-201.
- Creswell, JW. (2007). *Qualitative inquiry & research design: Choosing among five approaches*. 2<sup>nd</sup> Ed. Sage Publications, Inc: Thousand Oaks, CA.
- Cummins, S., Findlay, A., Higgins, C., Petticrew, M., Sparks, L., & Thomson, H. (2008). Reducing inequalities in health and diet: Findings from a study on the impact of a food retail development. *Environment and Planning A*, 40(2), 402-422.

- Cummins, S., Petticrew, M., Higgins, C., Findlay, A., & Sparks, L. (2005). Large scale food retailing as an intervention for diet and health: Quasi-experimental evaluation of a natural experiment. *Journal of Epidemiology & Community Health*, 59(12), 1035-1040.
- Dachner, N., Ricciuto, L., Kirkpatrick, S., & Tarasuk, V. (2010). Food purchasing and food insecurity among low-income families in Toronto. *Canadian Journal of Dietetic Practice and Research*, 71(3), e50-e56.
- Engler-Stringer, R. (2005). *Collective kitchens in three Canadian cities: Impacts on the lives of participants*. (Doctoral dissertation). Saskatoon: University of Saskatchewan.
- Engler-Stringer, R., Berenbaum, S. (2005). Collective kitchens in Canada: A review of the literature. *Canadian Journal of Dietetic Practice and Research*, 66(4), 246-51.
- Engler-Stringer, R., & Berenbaum, S. (2006). Food and nutrition-related learning in collective kitchens in three Canadian cities. *Canadian Journal of Dietetic Practice and Research*, 67(4), 178-83.
- Engler-Stringer, R., & Berenbaum, S. (2007a). Exploring social support through collective kitchen participation in three Canadian cities. *Canadian Journal of Community Mental Health*, 26(2), 91-105.
- Engler-Stringer, R., & Berenbaum, S. (2007b). Exploring food security with collective kitchen participants in three Canadian cities. *Qualitative Health Research*, 17(1), 75-84.
- Engler-Stringer, R., Stringer, B., & Haines, T. (2011). Complexity of food preparation and food security status in low-income young women. *Canadian Journal of Dietetic Practice and Research*, 72(3), 133-6.
- Fano, T., Tyminski, S., & Flynn, M. (2004). Evaluation of a collective kitchens program: using the population health promotion model. *Canadian Journal of Dietetic Practice and Research*, 65, 72-80.



- FAO. (1996). Rome Declaration on World Food Security, World Food Summit. Rome: Food and Agriculture Organisation.
- Fernandez NL. (1996). *Collective kitchens: knowledge formats and issues*. (Doctoral dissertation). Edmonton: University of Alberta.
- Finlay, L. (2009). Debating phenomenological research methods. *Phenomenology & Practice*, 3(1), 6-25.
- Fournier, D., Provost, M., & Goudreault, N. (1998). *Pauvrete et autonomie sociale: les cuisines collectives comme strategie de solidarite*. Montreal: Regroupement des cuisines collectives du Quebec et Relais femmes.
- Fuller, D., Engler-Stringer, R., and Muhajarine, N. (2015). *Examining food purchasing patterns from sales data at a full-service grocery store intervention in a former food desert*. Manuscript submitted for publication.
- Gittelsohn, J., Franceschini, M., Rasooly, I.R., Ries, A.V., Ho, L.S., Pavlovich, W., ... Frick, K.D. (2008). Understanding the food environment in a low-income urban setting: Implications for food store interventions. *Journal of Hunger & Environmental Nutrition*, 2(2-3), 33-50.
- Gittelsohn, J., Rowan, M., & Gadhoke, P. (2012). Interventions in small food stores to change the food environment, improve diet, and reduce risk of chronic disease. *Preventing Chronic Disease*, 9, E59.
- Gough, M. 2014. *Experiences of participants in the field of food insecurity through the lens of Bordieu's cultural capital: Practical and theoretical considerations*. Montreal: Universite de Montreal.
- Glanz, K., Sallis, J.F., Saelens, B.E., & Frank, L.D. (2005). Healthy nutrition environments: concepts and measures. *American Journal of Health promotion*, 19(5), 330-333.

Halling, S. (2008). *Intimacy, transcendence, and psychology*. New York, NY: Palgrave Macmillan.

Hamilton, N., & Bhatti, T. (1996). *Population Health Promotion: An Integrated Model of Population Health and Health Promotion*. Ottawa: Health Promotion Development Division

Hanson, Y. (2011). *Recipes for food insecurity: Women's stories from Saskatchewan*. Winnipeg, MB: Prairie Women's Health Centre of Excellence.

Holstein, J.A., & Gubrium, J.F. (1995). *The active interview*. Thousand Oaks, CA: SAGE Publishing Ltd.

Institute of Medicine (IOM) and National Research Council (NRC). (2009). *The public health effects of food deserts: Workshop summary*. Washington, D.C.: National Academies Press.

Kershaw, T., Creighton, T., Markham, T., & Marko, J. (2010). *Food access in Saskatoon*. Saskatoon, SK: Saskatoon Health Region.

La Via Campesina. 1996. *Food sovereignty: a future without hunger*. Retrieved from: <http://www.voiceoftheturtle.org/library/1996%20Declaration%20of%20Food%20Sovereignty.pdf> on December 17, 2012.

Larson, N., Story, M., & Nelson, M. (2009). Neighborhood environments disparities in access to healthy foods in the US. *American Journal of Preventative Medicine*, 36(1), 74-81.

Lemstra, M., & Neudorf, C. (2008). *Health disparity in Saskatoon: Analysis to intervention*. Saskatoon: Saskatoon Health Region.

Lemstra, M., Neudorf, C., & Opondo, J. (2006). Health disparity by neighbourhood income. *Canadian Journal of Public Health*, 97, 435-9.

- Li, F., Harmer, P., Cardinal, B.J., Bosworth, M., & Johnson-Shelton, D. (2009). Obesity and the built environment: Does the density of neighborhood fast-food outlets matter? *American journal of health promotion*, 23(3), 203.
- Lotoski, L., Engler-Stringer, R., & Muhajarine, N. (2015). Cross-sectional analysis of a community-based cooperative grocery store intervention in Saskatoon, Canada. *Canadian Journal of Public Health*. Manuscript submitted for publication.
- Mader, E. & Busse, H. (2011). Hungry in the heartland: Using community food systems as a strategy to reduce rural food deserts. *Journal of Hunger & Environmental Nutrition*, 6(1), 45-53. doi: 10.1080/19320248.2011.549377.
- Miazdyck-Shield, D. (2012). *Good Food Junction Baseline Data Report*. Saskatoon, SK: CHEP Good Food, Inc.
- Mikkonen, J., & Raphael, D. (2010). *Social Determinants of Health: The Canadian Facts*. Toronto, ON: York University School of Health Policy and Management.
- Moran, D. (2000). *Introduction to phenomenology*. London: Routledge.
- Morland, K. (2010). An evaluation of a neighborhood-level intervention to a local food environment. *American Journal of Preventive Medicine*, 39(6), e31-e38.
- Morse, J & Richards, L. (2002). *Readme First for a User's Guide to Qualitative Methods*. Thousand Oaks, CA: SAGE Publishing Ltd.
- Moustakas, C.E. (1994). *Phenomenological research methods*. Thousand Oaks, CA: SAGE Publishing Ltd.

- Munoz-Plaza, C.E., Filomena, S., & Morland, K.B. (2008). Disparities in food access: Inner-city residents describe their local food environment. *Journal of Hunger & Environmental Nutrition*, 2 (2-3), 51-64. doi: 10.1080/19320240801891453.
- Pasala, S.K., Rao, A.A., & Sridhar, G.R. (2010). Built environment and diabetes. *International Journal of Diabetes in Developing Countries*, 30(2), 63-68.
- Plante, Charles and Keisha Sharp. (2014). *Poverty Costs Saskatchewan: A New Approach to Prosperity for All*. Saskatoon, SK: Poverty Costs.
- Polkinghorne, D.E. 1989. *Phenomenological research methods*. In R.S. Valle & S. Halling (Eds.) Existential-phenomenological perspectives in psychology (p. 41-60). New York: Plenum.
- Public Health Observatory (2012). *Good Food Junction Community View map*. Saskatoon, SK: Public Health Services, Saskatoon Health Region.
- Raphael, D. (2009). *Social Determinants of Health: Canadian Perspectives* (2<sup>nd</sup> ed). Toronto: Canadian Scholars' Press.
- Raine, K.D. (2004). *Overweight and obesity in Canada: A population health perspective*. Ottawa, ON: Canadian Institutes for Health Information.
- Racine, S., & St-Onge, M. (2000). Les cuisines collectives: une voie vers la promotion de la santé mentale. *Canadian Journal of Community Mental Health*, 19(1), 37-62.
- Ripat G. (1998). *Community kitchens in Winnipeg: people cooking together, building community together*. Winnipeg: University of Manitoba.
- Rubin, H.J. & Rubin, I.S. (2011). *Qualitative interviewing: The art of hearing data*. (3<sup>rd</sup> ed). Los Angeles: SAGE Publications, Inc.

- Runnels, V., Kristjansson, E., & Calhoun, M. (2011). An investigation of adults' everyday experiences and effects of food insecurity in an urban area in Canada. *Canadian Journal of Community Mental Health*, 30(1), 157-172.
- Rothe, J.P. (2000). *Undertaking qualitative research: Concepts and cases in injury, health and social life*. Edmonton, AB: The University of Alberta Press.
- Saskatoon Community Clinic (2008). *Food deserts in Saskatoon: A potential health issue, especially for low income residents*. Saskatoon, SK: Community Health Services (Saskatoon) Association Ltd.
- Sallis, J.F., & Glanz, K. (2006). The role of built environments in physical activity, eating, and obesity in childhood. *The Future of Children / Center for the Future of Children, the David and Lucile Packard Foundation*. 16(1), 89-108.
- Salois, M.J. (2012). Obesity and diabetes, the built environment, and the 'local' food economy in the United States, 2007. *Economics & Humun Biology*. 10(1), 35-42.
- Station 20 West (2012). *Participating organizations*. Station 20 West Community Enterprise Centre. Retrieved from: <http://station20west.org/partners.html> on November 18, 2014.
- Tarasuk, V., & Reynolds, R. (1999). A qualitative study of community kitchens as a response to income-related food insecurity. *Canadian Journal of Dietetic Practice and Research*, 60(1), 11-16.
- Townshend, T., & Lake, A.A. (2009). Obesogenic urban form: Theory, policy and practice. *Health & Place*, 15(4), 909-916.
- van Manen, M. (1990). *Researching lived experience: Human Science for an action sensitive pedagogy*. London, ON: The Althouse Press.
- Vozoris, N., & Tarasuk, V. (2003). Household food insufficiency is associated with poorer health. *Journal of Nutrition*, 133, 120-126.

- Wang, M.C., MacLeod, K.E., Steadman, C., Williams, L., Bowie, S.L., Herd, D., ... Woo, M. (2007). Is the opening of a neighborhood full-service grocery store followed by a change in the food behavior of residents? *Journal of Hunger & Environmental Nutrition*, 2(1), 3–18.
- Webb, P., Coates, J., Frongillo, E.A., Rogers, B.L., Swindale, A., & Bilinsky, P. (2006). Measuring household food insecurity: Why it's so important and yet so difficult to do. *Journal of Nutrition*, 136, 1404S-1408S.
- Woods, F. (2003). *Access to food In Saskatoon's core neighborhood*. Saskatoon. SK: Community-University Institute for Social Research, University of Saskatchewan.
- Wrigley, N., Warm, D., & Margetts, B. (2003). Deprivation, diet, and food-retail access: Findings from the Leeds 'food deserts' study. *Environment and Planning*, 35, 151-188. doi: 10.1068/a35150.

## **APPENDIX A: INTERVIEW GUIDE**

Thank you for meeting with me today so I can listen to your stories. One of the things I'm learning about is called food security, which basically means that everyone always has the food that they need – food that is culturally appropriate, that keeps you healthy, that is affordable, and that you can get to. So, I have a few questions for you, and they will all help me think about that – about food security. So whatever you have to say about food security, and the different things in your life that affect that, I would love to hear those stories.

Guiding questions, categorized by research objectives. (Note: these questions may not be asked in this order, but are grouped for the sake of organization.)

**(Objective II:** To discover and report the experiences of food procurement of drop-in collective kitchen participants.)

Can you tell me how you heard about the CK?

What are your favourite parts about the CK? Least favourite?

Compared to where you used to meet for CKs, do you like it better here, or the way it was? How come?

**Objective III:** To examine if and how the co-location of organizations and programming within Station 20 West influences the experiences of collective kitchen participants.

What do you know about the other things that are in this building?

Do you go to any of their programs? Can you tell me about them?

(If yes) How did you start going? Did you find out about the CK first, or the other way around?

How about other organizations around here? (ie, You said you went to the food bank to do your taxes? One participant leads a physical activity program) Are you part of other programs?

Do you think these neighbourhoods have changed since Station 20 West opened? Do you think it's good change, or not so good change?

So, back to the CK....

When you go to a CK, does it change the grocery shopping you'd usually do (or that your husband would do)? (prompts: more or less or different groceries? More money to buy other foods that week?)

Where do you like to shop for your groceries? (or where does your husband go?)

- Is that by your house? Why do you shop there?

- Do you ever shop at the GFJ for groceries? (What do you buy there? OR Why not?)

**(Objective I:** To describe and analyze drop-in collective kitchen participants' experience of food [in]security. (quality, quantity, uncertainty/worry, social acceptability).)

Would you say that you and your family have enough food in your house all the time?

Do you have the right foods that you need? Bread? Meat? Fruits? Vegetables? Traditional foods?

Do you have land that you visit to get traditional foods? OR Do you have enough of the traditional foods of your home country/culture?

Do you ever worry about whether or not you will have food at the end of the week or the end of the month? Can you tell me more about how that's made you feel?

Do you ever visit the food bank to help you make sure you have enough food for the week/month? How do you feel about going there?



How do you feel about coming to the CK? Do you think people feel differently about it than the food bank?

Is there anything else you want to tell me about your experiences with the CK, or that would help me understand what we've talked about today?